

Fill in this information to identify the case:

Debtor name Alliance Laundry & Textile Service, LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) 18-31755-5

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration* _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 11, 2019

X /s/ John Giardino

Signature of individual signing on behalf of debtor

John Giardino

Printed name

Chief Executive Officer

Position or relationship to debtor

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**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

1a. Real property:

Copy line 88 from *Schedule A/B*..... \$ 0.00

1b. Total personal property:

Copy line 91A from *Schedule A/B*..... \$ 9,044,711.88

1c. Total of all property:

Copy line 92 from *Schedule A/B*..... \$ 9,044,711.88

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 21,925,384.50

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 170,277.24

3b. Total amount of claims of nonpriority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ 3,967,677.39

4. Total liabilities.....
Lines 2 + 3a + 3b

\$ 26,063,339.13

Fill in this information to identify the case:

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United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) 18-31755-5

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

No. Go to Part 2.

Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

No. Go to Part 3.

Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. Security Deposit for lease with Willingham 1631, LLC (EastPoint location)

\$40,000.00

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. Prepayment for sales tax (EastPoint location) paid to Georgia Department of Revenue

\$5,480.09

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$45,480.09

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

No. Go to Part 4.

Yes Fill in the information below.

11. **Accounts receivable**

Debtor Alliance Laundry & Textile Service, LLC Name Case number (*If known*) 18-31755-5

11a. 90 days old or less:	<u>1,511,452.90</u>	-	<u>45,343.59</u>	=	<u>\$1,466,109.31</u>
	face amount		doubtful or uncollectible accounts		

11b. Over 90 days old:	<u>1,894,548.13</u>	-	<u>999,586.72</u>	=....	<u>\$894,961.41</u>
	face amount		doubtful or uncollectible accounts		

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$2,361,070.72

Part 4: **Investments**

13. Does the debtor own any investments?

No. Go to Part 5.
 Yes Fill in the information below.

Part 5: **Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

No. Go to Part 6.
 Yes Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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19. **Raw materials**

20. **Work in progress**

21. **Finished goods, including goods held for resale**

22. **Other inventory or supplies**

Linens in service (Spartanburg location)	<u>_____</u>	<u>\$0.00</u>	<u>_____</u>	<u>\$743,411.95</u>
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Linens in service (Tri-State location)	<u>_____</u>	<u>\$0.00</u>	<u>_____</u>	<u>\$590,655.66</u>
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Linens in service (EastPoint location)	<u>_____</u>	<u>\$0.00</u>	<u>_____</u>	<u>\$760,626.45</u>
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23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$2,094,694.06

24. Is any of the property listed in Part 5 perishable?

No
 Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

<input type="checkbox"/> No	<u>0.00</u>	Valuation method	<u>_____</u>	Current Value	<u>87,215.32</u>
<input checked="" type="checkbox"/> Yes. Book value	<u>_____</u>				

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

Debtor Alliance Laundry & Textile Service, LLC
Name

Case number (*If known*) 18-31755-5

No
 Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

No. Go to Part 7.
 Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

No. Go to Part 8.
 Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Miscellaneous desks, chairs and other related office furniture	\$0.00		\$1,000.00
40.	Office fixtures Miscellaneous fixtures, HVAC system, boilers and related fixtures	\$0.00		\$5,000.00
41.	Office equipment, including all computer equipment and communication systems equipment and software Miscellaneous office equipment, computer, printers, time clocks, employee lockers, telephone system and related equipment	\$0.00		\$1,000.00
42.	Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
43.	Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			\$7,000.00
44.	Is a depreciation schedule available for any of the property listed in Part 7?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
45.	Has any of the property listed in Part 7 been appraised by a professional within the last year?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

No. Go to Part 9.
 Yes Fill in the information below.

Debtor Alliance Laundry & Textile Service, LLC Name Case number (*If known*) 18-31755-5

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
49. Aircraft and accessories			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) Miscellaneous machinery, fixtures and equipment used in the Debtor's business operations consisting of ironers, washers, folders, compressors, dryers and other related equipment	\$4,536,467.01	Book value	\$4,536,467.01

51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.	\$4,536,467.01
52. Is a depreciation schedule available for any of the property listed in Part 8?	
<input checked="" type="checkbox"/> No	
<input type="checkbox"/> Yes	
53. Has any of the property listed in Part 8 been appraised by a professional within the last year?	
<input checked="" type="checkbox"/> No	
<input type="checkbox"/> Yes	

Part 9: Real property

54. **Does the debtor own or lease any real property?**

No. Go to Part 10.
 Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.)	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. Lease of real property located at 355 Old Greenville Road, Spartanburg, South Carolina	Debtor is lessee	\$0.00		\$0.00
55.2. Lease of real property located at 1631 Willingham Drive, East Point, Georgia	Debtor is lessee	\$0.00		\$0.00

Debtor Alliance Laundry & Textile Service, LLC
Name

Case number (*If known*) 18-31755-5

56. **Total of Part 9.**

\$0.00

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

No
 Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

No
 Yes

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

No. Go to Part 11.

Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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60. **Patents, copyrights, trademarks, and trade secrets**

61. **Internet domain names and websites**

www.claruslinens.com \$0.00 \$0.00

62. **Licenses, franchises, and royalties**

63. **Customer lists, mailing lists, or other compilations**

64. **Other intangibles, or intellectual property**

65. **Goodwill**

66. **Total of Part 10.**

\$0.00

Add lines 60 through 65. Copy the total to line 89.

67. **Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?**

No
 Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

No
 Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

No
 Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.

Yes Fill in the information below.

Debtor Alliance Laundry & Textile Service, LLC
Name

Case number (*If known*) 18-31755-5

Part 12: **Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$0.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$45,480.09</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$2,361,070.72</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$2,094,694.06</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$7,000.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$4,536,467.01</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$9,044,711.88</u>	<u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$9,044,711.88</u>

Fill in this information to identify the case:

Debtor name Alliance Laundry & Textile Service, LLCUnited States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORKCase number (if known) 18-31755-5 Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

2.1 **HSBC Bank USA, National Association**

Creditor's Name

452 Fifth Avenue
New York, NY 10018

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

October 29, 2013

Last 4 digits of account number
6392

Do multiple creditors have an interest in the same property?

 No Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

All assets, including, but not limited to, receivables, equipment, general intangibles, inventory, leasehold interests and other related personal and real property

Describe the lien

Revolving Line of Credit

Is the creditor an insider or related party?

 No Yes

Is anyone else liable on this claim?

 No Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent

Unliquidated

Disputed

Column A

Amount of claim

Do not deduct the value of collateral.

\$12,000,000.00

Column B

Value of collateral that supports this claim

Unknown

2.2 **HSBC Bank USA, National Association**

Creditor's Name

452 Fifth Avenue
New York, NY 10018

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

October 29, 2013

Last 4 digits of account number

Describe debtor's property that is subject to a lien

All assets, including, but not limited to, receivables, equipment, general intangibles, inventory, leasehold interests and other related personal and real property

\$2,500,000.00

Unknown

Describe the lien

Revolving Line of Credit

Is the creditor an insider or related party?

 No Yes

Is anyone else liable on this claim?

 No Yes. Fill out Schedule H: Codebtors (Official Form 206H)

Debtor Alliance Laundry & Textile Service, LLC
Name

Case number (if known)

18-31755-5

6376

Do multiple creditors have an interest in the same property?

No
 Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply
 Contingent
 Unliquidated
 Disputed

2.3 HSBC Bank USA, National Association
Creditor's Name

452 Fifth Avenue
New York, NY 10018

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

October 29, 2013

Last 4 digits of account number

6200

Do multiple creditors have an interest in the same property?

No
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

All assets, including, but not limited to, receivables, equipment, general intangibles, inventory, leasehold interests and other related personal and real property

\$5,076,734.21

Unknown

Describe the lien

Revolving Line of Credit

Is the creditor an insider or related party?

No
 Yes
Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply
 Contingent
 Unliquidated
 Disputed

2.4 HSBC Bank USA, National Association
Creditor's Name

452 Fifth Avenue
New York, NY 10018

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

October 29, 2013

Last 4 digits of account number

6400

Do multiple creditors have an interest in the same property?

No
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

All assets, including, but not limited to, receivables, equipment, general intangibles, inventory, leasehold interests and other related personal and real property

\$920,625.00

Unknown

Describe the lien

Term Debt B

Is the creditor an insider or related party?

No
 Yes
Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply
 Contingent
 Unliquidated
 Disputed

2.5 HSBC Bank USA, National Association

Describe debtor's property that is subject to a lien

\$1,428,025.29

Unknown

Debtor	Alliance Laundry & Textile Service, LLC Name	Case number (if known)	18-31755-5
Creditor's Name		All assets, including, but not limited to, receivables, equipment, general intangibles, inventory, leasehold interests and other related personal and real property	
452 Fifth Avenue New York, NY 10018			
Creditor's mailing address		Describe the lien	
		<u>Equipment Line of Credit</u>	
		Is the creditor an insider or related party?	
		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
		Is anyone else liable on this claim?	
		<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)
Creditor's email address, if known		As of the petition filing date, the claim is:	
Date debt was incurred		Check all that apply	
October 29, 2013		<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated
Last 4 digits of account number		<input type="checkbox"/> Disputed	
6418			
Do multiple creditors have an interest in the same property?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.			
Creditor's Name		Describe debtor's property that is subject to a lien	
10712 South 1300 East Sandy, UT 84094		ScrubEx 128 Dispensers, ScrubEx 128 Remote Receivers, Packers, Video Equipment and web-based management software	
Creditor's mailing address		Describe the lien	
		<u>Lease/Security Interest</u>	
		Is the creditor an insider or related party?	
		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
		Is anyone else liable on this claim?	
		<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)
Creditor's email address, if known		As of the petition filing date, the claim is:	
Date debt was incurred		Check all that apply	
September 25, 2012		<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated
Last 4 digits of account number		<input type="checkbox"/> Disputed	
Creditor's Name		Describe debtor's property that is subject to a lien	
10712 South 1300 East Sandy, UT 84094		ScrubEx LV Dispenser/Receiver Unit, Packer, and Video	
Creditor's mailing address		Describe the lien	
		<u>Lease/Security Interest</u>	
		Is the creditor an insider or related party?	
		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
		Is anyone else liable on this claim?	
		<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)
Creditor's email address, if known			
Date debt was incurred			
February 27, 2014			
Last 4 digits of account number			

Debtor Alliance Laundry & Textile Service, LLC
Name

Case number (if known)

18-31755-5

Do multiple creditors have an interest in the same property?
 No
 Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:
 Check all that apply
 Contingent
 Unliquidated
 Disputed

2.8 IPA One

Creditor's Name

10712 South 1300 East
Sandy, UT 84094

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

July 23, 2014

Last 4 digits of account number

Do multiple creditors have an interest in the same property?
 No
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien
 ScrubEx 128 Remote Receiver with Packer and Video; ScrubEx LV Dispenser; ScrubEX SV48 Dispenser/Receiver and Video

Unknown

Unknown

Describe the lien

Lease/Security Interest

Is the creditor an insider or related party?

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

2.9 IPA One

Creditor's Name

10712 South 1300 East
Sandy, UT 84094

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

January 9, 2015

Last 4 digits of account number

Do multiple creditors have an interest in the same property?
 No
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien
 ScrubEx LV Dispenser and ScrubEx LV Remote Receiver, Packer, Video, Factory Re-Certified

Unknown

Unknown

Describe the lien

Lease/Security Interest

Is the creditor an insider or related party?

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

2.10 IPA One

Creditor's Name

10712 South 1300 East
Sandy, UT 84094

Creditor's mailing address

Describe debtor's property that is subject to a lien

ScrubEx MV Dispenser/Receiver Unit, Packer, Video; ScrubEx LV Dispenser; ScrubEx LV Remote Receiver, Packer, Video

Unknown

Unknown

Describe the lien

Lease/Security Interest

Debtor Alliance Laundry & Textile Service, LLC
Name

Case number (if known)

18-31755-5

Creditor's email address, if known

Is the creditor an insider or related party?

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred
January 9, 2015
Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No
 Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

Contingent
 Unliquidated
 Disputed

2.1
1

MB Financial Bank, N.A.

Creditor's Name

16111 North River Road
Rosemont, IL 60018

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

July 23, 2014

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

ScrubEx 128 Remote Receiver with Packer and Video; ScrubEx LV Dispenser; Scrub EX SV48 Dispenser/Receiver and Video

Unknown

Unknown

Describe the lien

Lease/Security Interest

Is the creditor an insider or related party?

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent
 Unliquidated
 Disputed

2.1
2

Med One Capital Funding,
LLC

Creditor's Name

10712 South 1300 East
Sandy, UT 84094

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

September 25, 2012

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien

ScrubEx 128 Dispensers, ScrubEx 128 Remote Receivers, Packers, Video Equipment and web-based management software

Unknown

Unknown

Describe the lien

Lease/Security Interest

Is the creditor an insider or related party?

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Debtor Alliance Laundry & Textile Service, LLC

Case number (if known)

18-31755-5

No
 Yes. Specify each creditor, including this creditor and its relative priority.

Contingent
 Unliquidated
 Disputed

2.1 Med One Capital Funding, LLC

Creditor's Name

10712 South 1300 East
Sandy, UT 84094

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

February 27, 2014

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

ScrubEx MV Dispenser/Receiver Unit, Packer, and Video

Unknown

Unknown

Describe the lien

Lease/Security Interest

Is the creditor an insider or related party?

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent
 Unliquidated
 Disputed

2.1 Med One Capital Funding, LLC

Creditor's Name

10712 South 1300 East
Sandy, UT 84094

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

July 23, 2014

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

ScrubEx 128 Remote Receiver with Packer and Video; ScrubEx LV Dispenser; Scrub EX SV48 Dispenser/Receiver and Video

Unknown

Unknown

Describe the lien

Lease/Security Interest

Is the creditor an insider or related party?

No
 Yes

Is anyone else liable on this claim?

No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent
 Unliquidated
 Disputed

2.1 Med One Capital Funding, LLC

Creditor's Name

10712 South 1300 East
Sandy, UT 84094

Creditor's mailing address

Describe debtor's property that is subject to a lien

ScrubEx LV Dispenser and ScrubEx LV Remote Receiver, Packer, Video, Factory Re-Certified

Unknown

Unknown

Describe the lien

Lease/Security Interest

Debtor Alliance Laundry & Textile Service, LLC Case number (if known) 18-31755-5

Name

Creditor's email address, if known

Date debt was incurred

January 9, 2015

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.1 6 Med One Capital Funding, LLC Unknown Unknown

Creditor's Name

10712 South 1300 East
Sandy, UT 84094

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

January 9, 2015

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

ScrubEx MV Dispenser/Receiver Unit, Packer, Video; ScrubEx LV Dispenser; ScrubEx LV Remote Receiver, Packer, Video

Unknown

Unknown

Describe the lien

Lease/Security Interest

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

2.1 7 Optum Bank, Inc. Unknown Unknown

Creditor's Name

2525 Lake Park Boulevard
Salt Lake City, UT 84120

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

February 27, 2018

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

ScrubEx MV Dispenser/Receiver Unit, Packer, and Video

Unknown

Unknown

Describe the lien

Lease/Security Interest

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

Debtor Alliance Laundry & Textile Service, LLC
Name

Case number (if known)

18-31755-5

2.1 8	<p>Optumhealth Bank, Inc. Creditor's Name</p> <p>2525 Lake Park Boulevard Salt Lake City, UT 84120 Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred September 25, 2012</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien ScrubEx 128 Dispensers, ScrubEx 128 Remote Receivers, Packers, Video Equipment and web-based management software</p> <p>Describe the lien <u>Lease/Security Interest</u></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	Unknown	Unknown
2.1 9	<p>Prime Alliance Bank Creditor's Name</p> <p>1868 South 500 West Woods Cross, UT 84087 Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred September 25, 2012</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien ScrubEx 128 Dispensers, ScrubEx 128 Remote Receivers, Packers, Video Equipment and web-based management software</p> <p>Describe the lien <u>Lease/Security Interest</u></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	Unknown	Unknown
2.2 0	<p>Prime Alliance Bank Creditor's Name</p> <p>1868 South 500 West Woods Cross, UT 84087 Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p>	<p>Describe debtor's property that is subject to a lien ScrubEx MV Dispenser/Receiver Unit, Packer, and Video</p> <p>Describe the lien <u>Lease/Security Interest</u></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input type="checkbox"/> No</p>	Unknown	Unknown

Debtor Alliance Laundry & Textile Service, LLC

Case number (if known)

18-31755-5

February 27, 2014

Last 4 digits of account number

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

Do multiple creditors have an
interest in the same property?

No

Yes. Specify each creditor,
including this creditor and its relative
priority.

As of the petition filing date, the claim is:

Check all that apply

- Contingent
- Unliquidated
- Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$21,925,384.
50

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did
you enter the related creditor?

Last 4 digits of
account number for
this entity

HSBC Bank USA, National Association
c/o Hahn & Hessen LLP
488 Madison Avenue
New York, NY 10022

Line 2.1

IPA One
c/o CT Lien Solutions
P.O. Box 29071
Glendale, CA 91209-9071

Line 2.6

Med One Capital Funding, LLC
c/o CT Lien Solutions
P.O. Box 29071
Glendale, CA 91209-9071

Line 2.12

Optumhealth Bank, Inc.
c/o CT Lien Solutions
P.O. Box 29071
Glendale, CA 91209-9071

Line 2.18

Prime Alliance Bank
c/o CT Lien Solutions
P.O. Box 29071
Glendale, CA 91209-9071

Line 2.19

Prime Alliance Bank
c/o CT Lien Solutions
P.O. Box 29071
Glendale, CA 91209-9071

Line 2.20

Fill in this information to identify the case:

Debtor name Alliance Laundry & Textile Service, LLCUnited States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORKCase number (if known) 18-31755-5 Check if this is an amended filingOfficial Form 206E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

 No. Go to Part 2. Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address City of Anderson Business License Office 601 South Main Street Anderson, SC 29624	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,907.44 Unknown
	Date or dates debt was incurred	Basis for the claim: Rents and property tax (Spartanburg location)	
	Last 4 digits of account number <u>7798</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.2	Priority creditor's name and mailing address City of East Point 1526 East Forrest Avenue, Suite 400 East Point, GA 30344	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$13,470.86 Unknown
	Date or dates debt was incurred	Basis for the claim: Rent and Property Tax (East Point location)	
	Last 4 digits of account number <u>4789</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Alliance Laundry & Textile Service, LLC Name	Case number (if known)	18-31755-5
2.3	Priority creditor's name and mailing address City of Spartanburg 1450 W. Broad Street Spartanburg, SC 29304	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$14,768.39 Unknown
	Date or dates debt was incurred	Basis for the claim: Rent and property tax (Spartanburg location)	
	Last 4 digits of account number <u>2753</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.4	Priority creditor's name and mailing address Floyd County Tax Commissioner 4 Government Plaza, Suite 109 Floyd County Historic Courthouse Rome, GA 30161	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
	Date or dates debt was incurred	Basis for the claim: Notice only (East Point location)	
	Last 4 digits of account number <u>Alliance</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.5	Priority creditor's name and mailing address Fulton County Tax Commissioner 141 Pryor Street SW Atlanta, GA 30303	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$55,669.61 Unknown
	Date or dates debt was incurred	Basis for the claim: Rent and property tax (East Point location)	
	Last 4 digits of account number <u>4789</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.6	Priority creditor's name and mailing address Georgia Department of Revenue Bankruptcy Section 1800 Century Blvd., NE, Ste 9100 Atlanta, GA 30345-3208	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
	Date or dates debt was incurred	Basis for the claim: Notice only (Austell and Eastpoint locations)	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Alliance Laundry & Textile Service, LLC Name	Case number (if known)	18-31755-5
2.7	Priority creditor's name and mailing address Georgia Department of Revenue Attn: Payroll Tax 148 Andrew Young International Blvd. Atlanta, GA 30303	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
	Date or dates debt was incurred	Basis for the claim: Notice only	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.8	Priority creditor's name and mailing address Internal Revenue Service Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
	Date or dates debt was incurred	Basis for the claim: Notice only	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.9	Priority creditor's name and mailing address S.C. Department of Revenue and Taxation P.O. Box 12265 Columbia, SC 29211-9979	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
	Date or dates debt was incurred	Basis for the claim: Notice only	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.10	Priority creditor's name and mailing address Spartanburg County Treasurer 366 North Church Street, #300 Spartanburg, SC 29303	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$80,460.94 Unknown
	Date or dates debt was incurred	Basis for the claim: Real property taxes	
	Last 4 digits of account number 3703	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Alliance Laundry & Textile Service, LLC Name	Case number (if known)	18-31755-5
2.11	Priority creditor's name and mailing address U.S. Securities and Exchange Commission Office of Reorganization 950 East Paces Ferry Road, NE, Suite 900 Atlanta, GA 30326-1382	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
	Date or dates debt was incurred	Basis for the claim: Notice only	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address A-1 Products Inc. P.O. Box 8347 Birmingham, AL 35118 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Notice only (East Point location) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.2	Nonpriority creditor's name and mailing address A-1 Products, Inc. 1235 E. Kennestone Circle Marietta, GA 30066 Date(s) debt was incurred Last 4 digits of account number 3271	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Rentals and repairs (Spartanburg location) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$122.91
3.3	Nonpriority creditor's name and mailing address ACA Enterprises 870 North Woodland Avenue Clyde, OH 43410 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Linens (Spartanburg location) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,857.44
3.4	Nonpriority creditor's name and mailing address ACA Enterprises 870 North Woodland Avenue Clyde, OH 43410 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Linens (East Point location) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,881.73
3.5	Nonpriority creditor's name and mailing address ACA Enterprises 870 North Woodland Avenue Clyde, OH 43410 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Linens (Tri-State location) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,371.29

Debtor Alliance Laundry & Textile Service, LLC
NameCase number (if known) 18-31755-5

3.6	Nonpriority creditor's name and mailing address AFLAC Worldwide Headquarters 1932 Wynnton Road Columbus, GA 31999	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (East Point location)</u>	
	Last 4 digits of account number <u>X977</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.7	Nonpriority creditor's name and mailing address Airgas USA, LLC 630 Buffington Road Piedmont, SC 29673	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.8	Nonpriority creditor's name and mailing address Alarm Systems, Inc. P.O. Box 2732 Rome, GA 30164-2732	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$860.00
	Date(s) debt was incurred _____	Basis for the claim: <u>Facility Maintenance (East Point location)</u>	
	Last 4 digits of account number <u>1130</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.9	Nonpriority creditor's name and mailing address American Associated Cos., Inc. P.O. Box 142039 Fayetteville, GA 30214	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$253,843.21
	Date(s) debt was incurred _____	Basis for the claim: <u>Linens (Spartanburg location)</u>	
	Last 4 digits of account number <u>ASPA</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.10	Nonpriority creditor's name and mailing address American Associated Cos., Inc. P.O. Box 142039 Fayetteville, GA 30214	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$149,722.05
	Date(s) debt was incurred _____	Basis for the claim: <u>Linens (East Point location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.11	Nonpriority creditor's name and mailing address American Associated Cos., Inc. 116 Bethea Road, Ste 424 Fayetteville, GA 30214	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$122,578.74
	Date(s) debt was incurred _____	Basis for the claim: <u>Linens (Tri-State location)</u>	
	Last 4 digits of account number <u>AALB</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.12	Nonpriority creditor's name and mailing address Amtech Industrial Supply, LLC 745 Trabert Avenue NW Atlanta, GA 30318	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$8,566.32
	Date(s) debt was incurred _____	Basis for the claim: <u>Rentals and repairs (East Point location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Alliance Laundry & Textile Service, LLC

Case number (if known)

18-31755-5

3.13	Nonpriority creditor's name and mailing address Applied Industrial Technologies 337 S. Erwin Street Cartersville, GA 30120-3913 Date(s) debt was incurred _____ Last 4 digits of account number <u>8908</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,002.12
3.14	Nonpriority creditor's name and mailing address Atlanta Sprinkler Inspection P.O. Box 929 Dacula, GA 30019-0929 Date(s) debt was incurred _____ Last 4 digits of account number <u>4507</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Facility maintenance (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$335.00
3.15	Nonpriority creditor's name and mailing address Atlas Copco Compressors LLC 92 Interstate Drive West Springfield, MA 01089 Date(s) debt was incurred _____ Last 4 digits of account number <u>1653</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,897.37
3.16	Nonpriority creditor's name and mailing address Banks Boiler Service, Inc. P.O. Box 50608 Albany, GA 31703-0608 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice only (Tri-State location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.17	Nonpriority creditor's name and mailing address Bearing Distributors, Inc. P.O. Box 887 Columbia, SC 29202 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice only (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.18	Nonpriority creditor's name and mailing address Bearings and Drives, Inc. P.O. Box 116733 Atlanta, GA 30368-6733 Date(s) debt was incurred _____ Last 4 digits of account number <u>3913</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice only (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.19	Nonpriority creditor's name and mailing address Boiler Supply Company P.O. Box 40225 Nashville, TN 37204-0225 Date(s) debt was incurred _____ Last 4 digits of account number <u>1680</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,733.76

Debtor Alliance Laundry & Textile Service, LLC
NameCase number (if known) 18-31755-5

3.20	Nonpriority creditor's name and mailing address Boyce Lee Blackwood III 230 Humphries Road Cowpens, SC 29330	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$460.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.21	Nonpriority creditor's name and mailing address C. J. Compton Plumbing & Heating, Inc. 7606 Prince Street Spartanburg, SC 29303	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.22	Nonpriority creditor's name and mailing address Caduceus Occupational 535 N. Central Ave. Atlanta, GA 30350	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (East Point location)</u>	
	Last 4 digits of account number <u>Alliance</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.23	Nonpriority creditor's name and mailing address Camp Industries, Inc. P.O. Box 833 38 Superior Drive Rome, GA 30161	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (East Point location)</u>	
	Last 4 digits of account number <u>ALLIANCE</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.24	Nonpriority creditor's name and mailing address Canon Financial Services, Inc. 14904 Collections Center Drive Chicago, IL 60693	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5,432.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>IT related (East Point location)</u>	
	Last 4 digits of account number <u>7001</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.25	Nonpriority creditor's name and mailing address Captain Vending Services 471 N. Sessions Street NW Marietta, GA 30060	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,267.64
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Office supplies (East Point location)</u>	
	Last 4 digits of account number <u>Alliance</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.26	Nonpriority creditor's name and mailing address Carolina Occupational Healthcare, LLC 1715 Blanding Street Columbia, SC 29201	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$185.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Recruiting and pre-employment (Austell location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.27	Nonpriority creditor's name and mailing address Carolina Technical Services, Inc. P.O. Box 268 China Grove, NC 28023	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$720.00
	Date(s) debt was incurred _____ Last 4 digits of account number <u>7102</u>	Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.28	Nonpriority creditor's name and mailing address Carson's Nut-Bolt & Tool Co., Inc. P.O. Box 3629 Greenville, SC 29608-3629	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Notice only (Spartanburg location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.29	Nonpriority creditor's name and mailing address CC Boiler Sales & Service, Inc. P.O. Box 561745 Charlotte, NC 28256	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$18,652.04
	Date(s) debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.30	Nonpriority creditor's name and mailing address Charter Communications P.O. Box 742614 Cincinnati, OH 45274-2614	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$346.94
	Date(s) debt was incurred _____ Last 4 digits of account number <u>8803</u>	Basis for the claim: <u>IT related (Spartanburg location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.31	Nonpriority creditor's name and mailing address Chase Professionals Tyler Staffing Services, Inc. P.O. Box 534501 Atlanta, GA 30353-4501	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$27,750.39
	Date(s) debt was incurred _____ Last 4 digits of account number <u>2404</u>	Basis for the claim: <u>Temp labor (East Point location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.32	Nonpriority creditor's name and mailing address Chem-Aqua P.O. Box 152170 Irving, TX 75015	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,966.30
	Date(s) debt was incurred _____ Last 4 digits of account number <u>9964</u>	Basis for the claim: <u>Chemicals (Spartanburg location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.33	Nonpriority creditor's name and mailing address Chem-Aqua 23261 Network Place Chicago, IL 60673-1232	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,528.93
	Date(s) debt was incurred _____ Last 4 digits of account number <u>9675</u>	Basis for the claim: <u>Chemicals (East Point location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.34	Nonpriority creditor's name and mailing address Chief Fire Protection Company 689 Whitehall Street, SW Atlanta, GA 30310	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$570.20
	Date(s) debt was incurred _____	<u>Facility maintenance (East Point location)</u>	
	Last 4 digits of account number <u>ALLIANCE LTS</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.35	Nonpriority creditor's name and mailing address Cintas - EP 1705 Corporate Drive, Suite 440 Norcross, GA 30093	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$304.16
	Date(s) debt was incurred _____	<u>Benefits (East Point location)</u>	
	Last 4 digits of account number <u>8527</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.36	Nonpriority creditor's name and mailing address Cintas Corporation P.O. Box 630803 Cincinnati, OH 45263-0803	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,589.83
	Date(s) debt was incurred _____	<u>Benefits (Spartanburg location)</u>	
	Last 4 digits of account number <u>4843</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.37	Nonpriority creditor's name and mailing address CIT 21146 Network Place Chicago, IL 60673-1211	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,905.06
	Date(s) debt was incurred _____	<u>Leased equipment (East Point location)</u>	
	Last 4 digits of account number <u>4103</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.38	Nonpriority creditor's name and mailing address City Electric Supply P.O. Box 71465 North Charleston, SC 29415	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____	<u>Notice only (East Point location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.39	Nonpriority creditor's name and mailing address City of Albany Attn: Finance Department P.O. Box 447, Suite 460 Albany, GA 31702-0447	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____	<u>Notice only (Tri-State location)</u>	
	Last 4 digits of account number <u>4166</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.40	Nonpriority creditor's name and mailing address City of East Point 2791 East Point Street East Point, GA 30344-3239	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$115,425.99
	Date(s) debt was incurred _____	<u>Utilities (East Point location)</u>	
	Last 4 digits of account number <u>9274</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.41	Nonpriority creditor's name and mailing address Combustion Services, Inc. 101 Mountain Ridge Industrial Park Taylors, SC 29687	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.42	Nonpriority creditor's name and mailing address Commercial Trailer Leasing, Inc. 103 Eisenhower Parkway, Suite 300 Roseland, NJ 07068	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$13,653.93
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Delivery (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.43	Nonpriority creditor's name and mailing address Commercial Trailer Leasing, Inc. 103 Eisenhower Parkway, Suite 300 Roseland, NJ 07068	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$590.88
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Delivery (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.44	Nonpriority creditor's name and mailing address Computer Software Architects LLC 601 21st Street, Suite 300 Vero Beach, FL 32960	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,120.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>IT related (Tri-State location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.45	Nonpriority creditor's name and mailing address Computer Software Architects LLC 601 21st Street, Suite 300 Vero Beach, FL 32960	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,540.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>IT related (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.46	Nonpriority creditor's name and mailing address Computer Software Architects LLC 601 21st Street, Suite 300 Vero Beach, FL 32960	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,420.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>IT services (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.47	Nonpriority creditor's name and mailing address Concentra Medical Centers P.O. Box 82730 Hapeville, GA 30354	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$135.50
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Recruiting and pre-employment (Austell location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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3.48	Nonpriority creditor's name and mailing address Consolidated International Corp. P.O. Box 3428 Rancho Palos Verdes, CA 90275	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.49	Nonpriority creditor's name and mailing address Constellation NewEnergy P.O. Box 5473 Carol Stream, IL 60197-5473	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$27,169.31
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Utilities (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.50	Nonpriority creditor's name and mailing address Crothall Laundry Services, Inc. 901 RA Dent Boulevard Augusta, GA 30901-5112	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,221.84
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Outside processing (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.51	Nonpriority creditor's name and mailing address Crowe Lawn Care LLC 6 Maplelane Street Spartanburg, SC 29301	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,850.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Facility maintenance (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.52	Nonpriority creditor's name and mailing address De Lage Landen Financial Services, Inc. P.O. Box 41602 Philadelphia, PA 19101-1602	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$814.08
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Leased equipment (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.53	Nonpriority creditor's name and mailing address De Lage Landen Financial Services, Inc. P.O. Box 41602 Philadelphia, PA 19101-1602	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$336.66
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Leased equipment (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.54	Nonpriority creditor's name and mailing address Directv Business Service Center P.O. Box 410347 Charlotte, NC 28241	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$28.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Services provided</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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3.55	Nonpriority creditor's name and mailing address Dival Safety Equipment, Inc. 1721 Niagara Street Buffalo, NY 14207	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$571.00
	Date(s) debt was incurred _____	Basis for the claim: <u>Other production expenses (Spartanburg and East Point location)</u>	
	Last 4 digits of account number <u>6093</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.56	Nonpriority creditor's name and mailing address Diversified Plastics, Inc. 1309 Highway 917 West Latta, SC 29565	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$9,894.71
	Date(s) debt was incurred _____	Basis for the claim: <u>Other production expenses (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.57	Nonpriority creditor's name and mailing address Duke Energy P.O. Box 70515 Charlotte, NC 28272-0515	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$10,730.34
	Date(s) debt was incurred _____	Basis for the claim: <u>Utilities (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.58	Nonpriority creditor's name and mailing address Eastern Industrial Supplies, Inc. P.O. Box 75106 Charlotte, NC 28275	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.59	Nonpriority creditor's name and mailing address Ecolab Pest Elimination Division 26252 Network Place Chicago, IL 60673-1262	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,612.43
	Date(s) debt was incurred _____	Basis for the claim: <u>Services provided (Spartanburg location)</u>	
	Last 4 digits of account number <u>0101</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.60	Nonpriority creditor's name and mailing address Encompass Group, LLC Dept. 40254 P.O. Box 740209 Atlanta, GA 30374-0209	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$861.00
	Date(s) debt was incurred _____	Basis for the claim: <u>Linens (Spartanburg location)</u>	
	Last 4 digits of account number <u>5422</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.61	Nonpriority creditor's name and mailing address EPS Plumbing Services, LLC 2076 Montgomery Drive Duluth, GA 30096	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$550.00
	Date(s) debt was incurred _____	Basis for the claim: <u>Rentals and repairs (East Point location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.62	Nonpriority creditor's name and mailing address ExperCare Attn: Billing Department P.O. Box 2233 Loves Park, IL 61131-2233 Date(s) debt was incurred _____ Last 4 digits of account number <u>2455</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (Austell location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$78.00
3.63	Nonpriority creditor's name and mailing address Express Services, Inc. P.O. Box 535434 Atlanta, GA 30353-5434 Date(s) debt was incurred _____ Last 4 digits of account number <u>0427</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Delivery (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49,123.11
3.64	Nonpriority creditor's name and mailing address Fashion Seal Uniforms P.O. Box 748000 Cincinnati, OH 45274-8000 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Linens (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,563.92
3.65	Nonpriority creditor's name and mailing address Fashion Seal Uniforms P.O. Box 748000 Cincinnati, OH 45274-8000 Date(s) debt was incurred _____ Last 4 digits of account number <u>3808</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Linens (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52,085.74
3.66	Nonpriority creditor's name and mailing address Fashion Seal Uniforms P.O. Box 748000 Cincinnati, OH 45274-8000 Date(s) debt was incurred _____ Last 4 digits of account number <u>3808</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Linens (Austell location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,893.60
3.67	Nonpriority creditor's name and mailing address Fashion Seal Uniforms P.O. Box 636822 Cincinnati, OH 45263-6822 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Linens (Tri-State location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,064.96
3.68	Nonpriority creditor's name and mailing address Fastenal Company 604A & 604B Cordell Drive College Park, GA 30349 Date(s) debt was incurred _____ Last 4 digits of account number <u>0937</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Other production expenses (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,037.84

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3.69	Nonpriority creditor's name and mailing address Fastenal Industrial & Construction Supp. P.O. Box 1286 Winona, MN 55987-1286	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (Tri-State location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.70	Nonpriority creditor's name and mailing address FedEx P.O. Box 223125 Pittsburgh, PA 15251-2125	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$357.02
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Delivery (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.71	Nonpriority creditor's name and mailing address Fedex P.O. Box 660481 Dallas, TX 75266-0481	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$24,932.23
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Delivery (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.72	Nonpriority creditor's name and mailing address Fedex P.O. Box 660481 Dallas, TX 75266-0481	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.73	Nonpriority creditor's name and mailing address Forklift Services, LLC P.O. Box 160880 Boiling Springs, SC 29316	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$749.93
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.74	Nonpriority creditor's name and mailing address Fowler Brothers Cleaners & Laundry 614 North Church Street Spartanburg, SC 29303	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$706.20
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Outside processing (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.75	Nonpriority creditor's name and mailing address G & K Services 6030 Lagrange Blvd. Atlanta, GA 30336	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,025.17
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Benefits (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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3.76	Nonpriority creditor's name and mailing address G-Five, Inc. 297-H Garlington Road Greenville, SC 29615 Date(s) debt was incurred _____ Last 4 digits of account number <u>2980</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,308.39
3.77	Nonpriority creditor's name and mailing address G. A. Braun, Inc. Department No. 309 P.O. Box 8000 Buffalo, NY 14267 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice only (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.78	Nonpriority creditor's name and mailing address GE Capital P.O. Box 105710 Atlanta, GA 30348-5710 Date(s) debt was incurred _____ Last 4 digits of account number <u>8717</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>IT related (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,075.21
3.79	Nonpriority creditor's name and mailing address Grady Health System 80 Jesse Hill Jr. Drive S.E. Atlanta, GA 30303-3050 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice only (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.80	Nonpriority creditor's name and mailing address Grainger 730 Congaree Road Greenville, SC 29607-3598 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,347.23
3.81	Nonpriority creditor's name and mailing address Grainger 5300 Frontage Road Forest Park, GA 30297-2516 Date(s) debt was incurred _____ Last 4 digits of account number <u>6406</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,944.44
3.82	Nonpriority creditor's name and mailing address Grainger Dept. 848866406 Palatine, IL 60038-0001 Date(s) debt was incurred _____ Last 4 digits of account number <u>6406</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice only (Tri-State location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.83	Nonpriority creditor's name and mailing address Harley's Electronics, Inc. 1093 Asheville Highway Spartanburg, SC 29303	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u> </u>	Basis for the claim: <u>Notice only (Spartanburg location)</u>	
	Last 4 digits of account number <u> </u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.84	Nonpriority creditor's name and mailing address Hospital Services, Inc. 2751 The Boulevard Columbia Industrial Park Columbia, SC 29209	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$401,452.06
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u> </u>	Basis for the claim: <u>Outside processing (Austell location)</u>	
	Last 4 digits of account number <u> </u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.85	Nonpriority creditor's name and mailing address Humbleton Industrial 49 Duncan Circle Sunny Industrial Park Hiram, GA 30141	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,655.29
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u> </u>	Basis for the claim: <u>Rentals and repairs (East Point location)</u>	
	Last 4 digits of account number <u>Allian</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.86	Nonpriority creditor's name and mailing address Hygiena, LLC 941 Avenida Acaso Camarillo, CA 93012	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,835.49
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u> </u>	Basis for the claim: <u>Recruiting and pre-employment (Spartanburg location)</u>	
	Last 4 digits of account number <u>1822</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.87	Nonpriority creditor's name and mailing address Hygiena, LLC 941 Avenida Acaso Camarillo, CA 93012	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,867.74
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u> </u>	Basis for the claim: <u>Recruiting and pre-employment (East Point location)</u>	
	Last 4 digits of account number <u>1822</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.88	Nonpriority creditor's name and mailing address Hygiena, LLC 941 Avenida Acaso Camarillo, CA 93012	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,443.10
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u> </u>	Basis for the claim: <u>Recruiting and pre-employment (Tri-State location)</u>	
	Last 4 digits of account number <u>1822</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.89	Nonpriority creditor's name and mailing address Illingworth Engineering Company 6855 Phillips Parkway Drive South Jacksonville, FL 32256	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred <u> </u>	Basis for the claim: <u>Notice only (Tri-State location)</u>	
	Last 4 digits of account number <u> </u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.90	Nonpriority creditor's name and mailing address Integra Business Alternatives LLC P.O. Box 4932 Albany, GA 31706	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$10,281.15
	Date(s) debt was incurred _____	Basis for the claim: Temp labor (Tri-State location); action pending	
	Last 4 digits of account number <u>910</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.91	Nonpriority creditor's name and mailing address Interstate Nationalease 2700 Palmyra Road Albany, GA 31707	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,394.50
	Date(s) debt was incurred _____	Basis for the claim: Delivery (Tri-State location)	
	Last 4 digits of account number <u>3000</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.92	Nonpriority creditor's name and mailing address Jackson-Hirsch, Inc. 700 Anthony Trail Northbrook, IL 60062	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$198.06
	Date(s) debt was incurred _____	Basis for the claim: Rentals and repairs (East Point location)	
	Last 4 digits of account number <u>4537</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.93	Nonpriority creditor's name and mailing address Jensen USA, Inc. Dept. CH 19533 Palatine, IL 60055-9533	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____	Basis for the claim: Notice only (East Point location)	
	Last 4 digits of account number <u>1467</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.94	Nonpriority creditor's name and mailing address Kaeser Compressors P.O. Box 946 Fredericksburg, VA 22404	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____	Basis for the claim: Notice only (East Point location)	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.95	Nonpriority creditor's name and mailing address Key Office Solutions 841 California Avenue Spartanburg, SC 29303	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$204.48
	Date(s) debt was incurred _____	Basis for the claim: Office supplies (Spartanburg location)	
	Last 4 digits of account number <u>324</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.96	Nonpriority creditor's name and mailing address Laboratory Corp. of America Holding P.O. Box 12140 Burlington, NC 27216-2140	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$105.00
	Date(s) debt was incurred _____	Basis for the claim: Recruiting and pre-employment (East Point location)	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.97	Nonpriority creditor's name and mailing address Lavatec Laundry Technologies, Inc. P.O. Box 215 49 Lancaster Drive Beacon Falls, CT 06403	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (Spartanburg and Tri-State locations)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.98	Nonpriority creditor's name and mailing address Leaf P.O. Box 742647 Cincinnati, OH 45274-2647	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,926.27
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Office Supplies (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.99	Nonpriority creditor's name and mailing address Leaf - 004 P.O. Box 742647 Cincinnati, OH 45274-2647	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,263.20
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Office supplies (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.100	Nonpriority creditor's name and mailing address M & J Machine, Inc. P.O. Box 5993 Spartanburg, SC 29304-5993	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.101	Nonpriority creditor's name and mailing address Maxi-Press Elastomeric, Inc. 80 Turnpike Drive, Suite 4 Middlebury, CT 06762	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.102	Nonpriority creditor's name and mailing address McMaster-Carr P.O. Box 7690 Chicago, IL 60680-7690	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$4,862.03
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.103	Nonpriority creditor's name and mailing address McMaster-Carr P.O. Box 7690 Chicago, IL 60680-7690	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$874.97
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Rentals and repairs (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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3.104	Nonpriority creditor's name and mailing address McNaughton-McKay Electric Co. P.O. Box 890976 Charlotte, NC 28289	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.105	Nonpriority creditor's name and mailing address Med One Capital Funding, LLC P.O. Box 708278 Sandy, UT 84070	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$7,784.32
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim: <u>Leased equipment (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.106	Nonpriority creditor's name and mailing address Mediacom Business 1104 N. Westover Boulevard Albany, GA 31707-6626	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$173.63
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim: <u>Marketing (Tri-State location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.107	Nonpriority creditor's name and mailing address Medline Industries Inc. Dept. CH 14400 Palatine, IL 60055-4400	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (East Point and Tri-State locations)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.108	Nonpriority creditor's name and mailing address Medline Industries Inc. Box 382075 Pittsburgh, PA 15251-8075	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,146.19
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim: <u>Linens (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.109	Nonpriority creditor's name and mailing address Morrisette Paper Company, Inc. P.O. Box 890982 Charlotte, NC 28289-0982	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.110	Nonpriority creditor's name and mailing address Nathan Harvey Enterprises Inc. 645 Cooper Road Social Circle, GA 30025	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$350.00
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim: <u>(East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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3.111	Nonpriority creditor's name and mailing address NY Urgent Care Practices, P.C. P.O. Box 500 Ellicottville, NY 14731-0500 Date(s) debt was incurred _____ Last 4 digits of account number <u>1665</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$890.00
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: <u>Recruiting and pre-employment (Spartanburg location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.112	Nonpriority creditor's name and mailing address NY Urgent Care Practices, P.C. P.O. Box 500 Ellicottville, NY 14731-0500 Date(s) debt was incurred _____ Last 4 digits of account number <u>1662</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$322.00
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: <u>Recruiting and pre-employment (East Point location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.113	Nonpriority creditor's name and mailing address NY Urgent Care Practices, P.C. P.O. Box 500 Ellicottville, NY 14731-0500 Date(s) debt was incurred _____ Last 4 digits of account number <u>2511</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$20.00
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: <u>Recruiting and pre-employment (Austell location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.114	Nonpriority creditor's name and mailing address NY Urgent Care Practices, P.C. P.O. Box 500 Ellicottville, NY 14731-0500 Date(s) debt was incurred _____ Last 4 digits of account number <u>2744</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$50.00
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: <u>Recruiting and pre-employment (Tri-State location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.115	Nonpriority creditor's name and mailing address Orkin 1400 Marietta Blvd. W, Suite B Atlanta, GA 30318-4144 Date(s) debt was incurred _____ Last 4 digits of account number <u>2042</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$125.00
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: <u>Facility maintenance (East Point location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.116	Nonpriority creditor's name and mailing address Osceola Supply, Inc. P.O. Box 13503 Tallahassee, FL 32317 Date(s) debt was incurred _____ Last 4 digits of account number <u>3734</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$11,784.60
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: <u>Chemicals (Tri-State location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.117	Nonpriority creditor's name and mailing address Overhead Door of Atlanta 221 Armour Drive Atlanta, GA 30324 Date(s) debt was incurred _____ Last 4 digits of account number <u>ALLIANCE</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Basis for the claim: <u>Notice only (East Point location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.118	Nonpriority creditor's name and mailing address Pace Analytical Services, Inc. P.O. Box 684056 Chicago, IL 60695-4056	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,080.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Rentals and repairs (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.119	Nonpriority creditor's name and mailing address Palmetto Compressors, Inc. P.O. Box 577 302 Hughes Street Clemson, SC 29633	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.120	Nonpriority creditor's name and mailing address Partsmaster P.O. Box 655326 Dallas, TX 75265	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$4,054.68
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Rentals and repairs (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.121	Nonpriority creditor's name and mailing address Penske Truck Leasing Co., L.P. P.O. Box 532658 Atlanta, GA 30353-2658	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$39,462.25
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Delivery (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.122	Nonpriority creditor's name and mailing address Penske Truck Leasing Co., L.P. 2675 Morgantown Road Reading, PA 19607	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$23,237.74
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Delivery (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.123	Nonpriority creditor's name and mailing address Penske Truck Leasing Co., L.P. P.O. Box 532658 Atlanta, GA 30353-2658	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (Austell location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.124	Nonpriority creditor's name and mailing address PeopleReady Inc. 1015 "A" Street Tacoma, WA 98402	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$31,802.49
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Temp labor (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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3.125	Nonpriority creditor's name and mailing address Phillips Staffing c/o AR Funding P.O. Box 16253 Greenville, SC 29606	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$126,385.45
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Temp labor (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.126	Nonpriority creditor's name and mailing address Phoebe Corporate Health Center 2410 Sylvester Road Albany, GA 31705	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,615.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Recruiting and pre-employment (Tri-State location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.127	Nonpriority creditor's name and mailing address Piedmont Natural Gas P.O. Box 1246 Charlotte, NC 28201-1246	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$8,735.47
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Utilities (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.128	Nonpriority creditor's name and mailing address Powell Contract Services, LLC 129 Lake Estates Drive Ashburn, GA 31714	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$368.45
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Rentals and repairs (Tri-State location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.129	Nonpriority creditor's name and mailing address Protection 1/ADT P.O. Box 219044 Kansas City, MO 64121-9044	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$864.72
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Rentals and repairs (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.130	Nonpriority creditor's name and mailing address Pumps, Valves and Controls 1709 South Slappey Boulevard Albany, GA 31701	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (Tri-State location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.131	Nonpriority creditor's name and mailing address Pure Health Solutions Inc. P.O. Box 742647 Cincinnati, OH 45274-2647	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$72.40
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Recruiting and pre-employment (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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3.132	Nonpriority creditor's name and mailing address Pye-Barker Fire & Safety, Inc. P.O. Box 69 Roswell, GA 30077-0069 Date(s) debt was incurred _____ Last 4 digits of account number <u>8520</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$242.78
3.133	Nonpriority creditor's name and mailing address R. S. Andrews 3617 Clearview Parkway Atlanta, GA 30340 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$780.00
3.134	Nonpriority creditor's name and mailing address Raintree Waste P.O. Box 18974 Atlanta, GA 31126 Date(s) debt was incurred _____ Last 4 digits of account number <u>2738</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,275.00
3.135	Nonpriority creditor's name and mailing address Republic Services #744 P.O. Box 9001099 Louisville, KY 40290-1099 Date(s) debt was incurred _____ Last 4 digits of account number <u>7564</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$905.05
3.136	Nonpriority creditor's name and mailing address Right Sales & Service 1666 East Vesta Avenue Atlanta, GA 30337 Date(s) debt was incurred _____ Last 4 digits of account number <u>Alliance LTS</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice only (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.137	Nonpriority creditor's name and mailing address Robertson Home Improvement 2320 Prime Point Conyers, GA 30013 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice only (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.138	Nonpriority creditor's name and mailing address Rogers & Callcott Environmental Attn: Accounts Receivable P.O. Box 5655 Greenville, SC 29606 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,179.92

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3.139	Nonpriority creditor's name and mailing address Rome Electric Motor Works 36 Westside Industrial Boulevard Rome, GA 30165	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.140	Nonpriority creditor's name and mailing address Ross Textiles, Inc. P.O. Box 622 507 King Street E Bethune, SC 29009	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (East Point and Tri-State locations)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.141	Nonpriority creditor's name and mailing address Ryder P.O. Box 402366 Atlanta, GA 30384-2366	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.142	Nonpriority creditor's name and mailing address Ryder P.O. Box 402366 Atlanta, GA 30384-2366	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$824.99
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Delivery (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.143	Nonpriority creditor's name and mailing address Ryder P.O. Box 402366 Atlanta, GA 30384-2366	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5,076.69
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Delivery (Tri-State location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.144	Nonpriority creditor's name and mailing address Scale Systems, Inc. P.O. Box 116733 Atlanta, GA 30368-6733	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$365.00
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Notice only (East Point location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.145	Nonpriority creditor's name and mailing address Shippers Supply, Inc. P.O. Box 8238 Spartanburg, SC 29305	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$463.79
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <u>Other production expenses (Spartanburg location)</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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3.146	Nonpriority creditor's name and mailing address SimplexGrinnell District #23 2788 Fairforest Clevedale Spartanburg, SC 29301	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,735.62
	Date(s) debt was incurred _____	Basis for the claim: <u>Facility maintenance (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.147	Nonpriority creditor's name and mailing address Southeastern Freight 420 Davega Road Lexington, SC 29073	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$171.41
	Date(s) debt was incurred _____	Basis for the claim: <u>Delivery (Tri-State location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.148	Nonpriority creditor's name and mailing address Southern Industrial Electronics Inc. 834 Pine Avenue Albany, GA 31701	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (Tri-State location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.149	Nonpriority creditor's name and mailing address Spa Rent 803 3rd Avenue, Floor 8 New York, NY 10022	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.150	Nonpriority creditor's name and mailing address Spartanburg Regional Healthcare Services Patient Financial Services P.O. Box 743070 Atlanta, GA 30374-3070	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$9,595.00
	Date(s) debt was incurred _____	Basis for the claim: <u>Recruiting and pre-employment (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.151	Nonpriority creditor's name and mailing address Spartanburg Water System 200 Commerce Street P.O. Box 251 Spartanburg, SC 29304	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$42,443.01
	Date(s) debt was incurred _____	Basis for the claim: <u>Utilities (Spartanburg location)</u>	
	Last 4 digits of account number <u>0585</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.152	Nonpriority creditor's name and mailing address Standard Textile P.O. Box 630302 Cincinnati, OH 45263-0302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$341,917.75
	Date(s) debt was incurred _____	Basis for the claim: <u>Linens (Spartanburg location)</u>	
	Last 4 digits of account number <u>2000</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.153	Nonpriority creditor's name and mailing address Standard Textile One Knollcrest Drive Cincinnati, OH 45237	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$510,021.63
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Linens (East Point location)</u>	
	Last 4 digits of account number <u>2723</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.154	Nonpriority creditor's name and mailing address Standard Textile P.O. Box 630302 Cincinnati, OH 45263-0302	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$104,524.32
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Linens (Austell location)</u>	
	Last 4 digits of account number <u>2723</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.155	Nonpriority creditor's name and mailing address Standard Textile P.O. Box 630302 Cincinnati, OH 45263-0302	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$740.64
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Linens (Tri-State location)</u>	
	Last 4 digits of account number <u>7153</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.156	Nonpriority creditor's name and mailing address Staples Advantage Dept ATL P.O. Box 105748 Atlanta, GA 30384-5386	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,485.58
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Office supplies (East Point location)</u>	
	Last 4 digits of account number <u>4203</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.157	Nonpriority creditor's name and mailing address Steel Core Industrial Supply 849 California Avenue Spartanburg, SC 29303	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.158	Nonpriority creditor's name and mailing address Stericycle, Inc. P.O. Box 6582 Carol Stream, IL 60197-6582	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,007.08
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Facility maintenance (Spartanburg location)</u>	
	Last 4 digits of account number <u>8472</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.159	Nonpriority creditor's name and mailing address Stericycle, Inc. P.O. Box 6582 Carol Stream, IL 60197-6582	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,472.22
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Facility maintenance (East Point location)</u>	
	Last 4 digits of account number <u>9204</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.160	Nonpriority creditor's name and mailing address Storms Industries, Inc. 1500 S. Western Ave. Chicago, IL 60608	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,381.38
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Rentals and repairs (East Point and Spartanburg locations)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.161	Nonpriority creditor's name and mailing address Streamline Solutions P.O. Box 560775 Orlando, FL 32856	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$4,547.50
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Linen cost of goods sold (East Point location)</u>	
	Last 4 digits of account number <u>2614</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.162	Nonpriority creditor's name and mailing address Streamline Solutions P.O. Box 560775 Orlando, FL 32856	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$9,802.70
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Linen cost of goods sold (Tri-State location)</u>	
	Last 4 digits of account number <u>3448</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.163	Nonpriority creditor's name and mailing address Sunbelt Rentals, Inc. P.O. Box 409211 Atlanta, GA 30384-9211	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,243.79
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u>	
	Last 4 digits of account number <u>5719</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.164	Nonpriority creditor's name and mailing address Superior Document Solutions 1925 Breckinridge Plaza Ste. 160 Duluth, GA 30096	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,344.15
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Leased equipment (East Point location)</u>	
	Last 4 digits of account number <u>ALLLAU</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.165	Nonpriority creditor's name and mailing address Tamiko Favors c/o Barrett & Farahany Attn: Amanda A. Farahany, Esq. 1100 Peachtree Street, Suite 500 Atlanta, GA 30309	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
		<input checked="" type="checkbox"/> Contingent	
		<input checked="" type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Discrimination proceeding</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.166	Nonpriority creditor's name and mailing address Teems Electric Inc. 6362 Battle Field Pkwy. Ringgold, GA 30736	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5,060.33
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Rentals and repairs (East Point location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.167	Nonpriority creditor's name and mailing address Terminix Service, Inc. Attn: Central Accounting 3612 Fernandina Road Columbia, SC 29210 Date(s) debt was incurred _____ Last 4 digits of account number <u>8668</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
3.168	Nonpriority creditor's name and mailing address Texchine Inc. P.O. Box 188 207 Beaufort Street Chapin, SC 29036 Date(s) debt was incurred _____ Last 4 digits of account number <u>LI01</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice only (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.169	Nonpriority creditor's name and mailing address Thermal Engineering of Arizona 2250 W. Wetmore Road Tucson, AZ 85705 Date(s) debt was incurred _____ Last 4 digits of account number <u>2337</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,279.53
3.170	Nonpriority creditor's name and mailing address Thermopatch Corporation P.O. Box 8007 Syracuse, NY 13217-8007 Date(s) debt was incurred _____ Last 4 digits of account number <u>6735</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Other production expenses (Spartanburg location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,279.78
3.171	Nonpriority creditor's name and mailing address Thermopatch Corporation P.O. Box 8007 Syracuse, NY 13217-8007 Date(s) debt was incurred _____ Last 4 digits of account number <u>1267</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Other production expenses (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,335.44
3.172	Nonpriority creditor's name and mailing address Tingue, Brown & Co. 309 Dividend Drive Peachtree City, GA 30269 Date(s) debt was incurred _____ Last 4 digits of account number <u>4480</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (East Point location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,283.25
3.173	Nonpriority creditor's name and mailing address Tingue, Brown & Co. P.O. Box 824619 Philadelphia, PA 19182-4619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rentals and repairs (Tri-State location)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,929.04

Debtor	Alliance Laundry & Textile Service, LLC Name	Case number (if known)	18-31755-5
3.174	Nonpriority creditor's name and mailing address TLC Tri-State Laundry Companies P.O. Box 1259 Waycross, GA 31502-1259 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$373.02
		Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.175	Nonpriority creditor's name and mailing address TLC Tri-State Laundry Companies P.O. Box 69 Valdosta, GA 31603-0069 Date(s) debt was incurred _____ Last 4 digits of account number <u>Alliance LTS</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$65,372.73
		Basis for the claim: <u>Rentals and repairs (East Point location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.176	Nonpriority creditor's name and mailing address TLC Tri-State Laundry Companies P.O. Box 69 Valdosta, GA 31603-0069 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,437.84
		Basis for the claim: <u>Rentals and repairs (Tri-State location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.177	Nonpriority creditor's name and mailing address Uline 12575 Uline Drive Pleasant Prairie, WI 53158 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
		Basis for the claim: <u>Notice only (East Point location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.178	Nonpriority creditor's name and mailing address ULS Acquisition, LLC 803 3rd Avenue, Floor 8 New York, NY 10022 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$41,666.68
		Basis for the claim: <u>Rent and property taxes owed to affiliate (Spartanburg location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.179	Nonpriority creditor's name and mailing address United Rentals (North America), Inc. P.O. Box 100711 Atlanta, GA 30384-0711 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
		Basis for the claim: <u>Notice only (East Point location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.180	Nonpriority creditor's name and mailing address Universal Environmental Services, LLC 411 Dividend Drive Peachtree City, GA 30269 Date(s) debt was incurred _____ Last 4 digits of account number <u>A355</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$25.00
		Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Alliance Laundry & Textile Service, LLCCase number (if known) 18-31755-5

3.181	Nonpriority creditor's name and mailing address Vaspian LLC P.O. Box 3399 Buffalo, NY 14240	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$330.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>IT related (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.182	Nonpriority creditor's name and mailing address Vaspian LLC P.O. Box 3399 Buffalo, NY 14240	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$990.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>IT related (East Point location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.183	Nonpriority creditor's name and mailing address Vaughn Belting Co., Inc. P.O. Box 5505 Spartanburg, SC 29304	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.184	Nonpriority creditor's name and mailing address Wachovia Commercial Loan (0009-1) P.O. Box 41602 Philadelphia, PA 19101-1601	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (East Point location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.185	Nonpriority creditor's name and mailing address Waldrop Mechanical Services P.O. Box 369 Reidville, SC 29375	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,228.59
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Rentals and repairs (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.186	Nonpriority creditor's name and mailing address Walton EMC Natural Gas P.O. Box 1347 Monroe, GA 30655-1347	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$11,904.93
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Utilities (East Point location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.187	Nonpriority creditor's name and mailing address WebAddo, Inc. 1270 Caroline Street Suite D120-106 Atlanta, GA 30307	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$890.39
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>IT related (East Point location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Alliance Laundry & Textile Service, LLCCase number (if known) 18-31755-5

3.188	Nonpriority creditor's name and mailing address Weldor's Supply HOUse, Inc. P.O. Box 4926 Spartanburg, SC 29305-4926	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (Spartanburg location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.189	Nonpriority creditor's name and mailing address Wellstar Health Systems 1800 Parkway Place Marietta, GA 30067	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,010,731.26
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input checked="" type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Outside processing (Austell location); judgment entered in Superior Court of Cobb County, State of Georgia</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.190	Nonpriority creditor's name and mailing address Willingham 1631, LLC B.T. Investments P.O. Box 25585 San Mateo, CA 94402	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (East Point location)</u>	
	Last 4 digits of account number <u>Alliance</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.191	Nonpriority creditor's name and mailing address Wiregrass Rehabilitation Center 795 Ross Clark Circle #1 Dothan, AL 36303	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Notice only (Tri-State location)</u>	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.192	Nonpriority creditor's name and mailing address Wright Express P.O. Box 639 Portland, ME 04104	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$21,555.76
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Delivery (East Point location)</u>	
	Last 4 digits of account number <u>2850</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	American Associated Cos., Inc. 140 Cecil Court Fayetteville, GA 30214	Line <u>3.9</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	American Associated Cos., Inc. 140 Cecil Court Fayetteville, GA 30214	Line <u>3.10</u> <input type="checkbox"/> Not listed. Explain _____	—

Debtor	Alliance Laundry & Textile Service, LLC Name	Case number (if known)	18-31755-5
Name and mailing address		On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.3	Atlanta Sprinkler Inspection 32 Business Center Drive Winder, GA 30680	Line <u>3.14</u> <input type="checkbox"/> Not listed. Explain _____	-
4.4	Banks Boiler Service, Inc. 2265 Toledo Drive Albany, GA 31705	Line <u>3.16</u> <input type="checkbox"/> Not listed. Explain _____	-
4.5	Cintas-EP P.O. Box 631025 Cincinnati, OH 45263-1025	Line <u>3.35</u> <input type="checkbox"/> Not listed. Explain _____	-
4.6	City of Albany Attn: Finance Department 222 Pine Avenue Albany, GA 31702-0447	Line <u>3.39</u> <input type="checkbox"/> Not listed. Explain _____	<u>4166</u>
4.7	De Lage Landen Financial Services, Inc. 1111 Old Eagle School Road Wayne, PA 19087	Line <u>3.52</u> <input type="checkbox"/> Not listed. Explain _____	<u>9865</u>
4.8	De Lage Landen Financial Services, Inc. 1111 Old Eagle School Road Wayne, PA 19087	Line <u>3.53</u> <input type="checkbox"/> Not listed. Explain _____	-
4.9	Floyd County Tax Commissioner P.O. Box 26 Rome, GA 30162-0026	Line <u>2.4</u> <input type="checkbox"/> Not listed. Explain _____	<u>Alliance</u>
4.10	Grainger Dept. 831813324 Palatine, IL 60038-0001	Line <u>3.80</u> <input type="checkbox"/> Not listed. Explain _____	-
4.11	Grainger Dept. 848866406 Palatine, IL 60038-0001	Line <u>3.81</u> <input type="checkbox"/> Not listed. Explain _____	<u>6406</u>
4.12	Integra Business Alternatives LLC 1704 N. Slaphey Blvd. Albany, GA 31701	Line <u>3.90</u> <input type="checkbox"/> Not listed. Explain _____	<u>910</u>
4.13	Integra Business Alternatives, LLC c/o Kitchens Kelley Gaynes P.C. Attn: Bryan Kaplan, Esq. 5555 Glenridge Connector Atlanta, GA 30342	Line <u>3.90</u> <input type="checkbox"/> Not listed. Explain _____	-
4.14	Jensen USA, Inc. 99 Aberdeen Loop Panama City, FL 32405	Line <u>3.93</u> <input type="checkbox"/> Not listed. Explain _____	-
4.15	Med One Group 10712 South 1300 East Sandy, UT 84094	Line <u>3.105</u> <input type="checkbox"/> Not listed. Explain _____	<u>4070</u>

Debtor	Alliance Laundry & Textile Service, LLC Name	Case number (if known)	18-31755-5
Name and mailing address		On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.16	Osceola Supply, Inc. 915 Commerce Boulevard Midway, FL 32343	Line <u>3.116</u>	<u>3734</u>
		<input type="checkbox"/> Not listed. Explain _____	
4.17	Partsmaster 2727 Chemsearch Blvd. Irving, TX 75062	Line <u>3.120</u>	<u>4381</u>
		<input type="checkbox"/> Not listed. Explain _____	
4.18	Penske Truck Leasing Co., L.P. 2675 Morgantown Road Reading, PA 19607	Line <u>3.121</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.19	Penske Truck Leasing Co., L.P. P.O. Box 532658 Atlanta, GA 30353-2658	Line <u>3.122</u>	<u>0318</u>
		<input type="checkbox"/> Not listed. Explain _____	
4.20	Penske Truck Leasing Co., L.P. 2675 Morgantown Road Reading, PA 19607	Line <u>3.123</u>	<u>0098</u>
		<input type="checkbox"/> Not listed. Explain _____	
4.21	Raintree Waste 1073 Ridge Avenue SW Atlanta, GA 30315	Line <u>3.134</u>	<u>2738</u>
		<input type="checkbox"/> Not listed. Explain _____	
4.22	S.C. Department of Revenue and Taxation 775 Addison Avenue, Ste 201 Rock Hill, SC 29730	Line <u>2.9</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.23	SimplexGrinnell Dept. CH 10320 Palatine, IL 60055-0320	Line <u>3.146</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.24	Standard Textile One Knollcrest Drive Cincinnati, OH 45237	Line <u>3.152</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.25	Standard Textile P.O. Box 630302 Cincinnati, OH 45263-0302	Line <u>3.153</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.26	Standard Textile One Knollcrest Drive Cincinnati, OH 45237	Line <u>3.154</u>	<u>2723</u>
		<input type="checkbox"/> Not listed. Explain _____	
4.27	Standard Textile One Knollcrest Drive Cincinnati, OH 45237	Line <u>3.155</u>	<u>7153</u>
		<input type="checkbox"/> Not listed. Explain _____	
4.28	Staples Advantage Dept ATL P.O. Box 405386 Atlanta, GA 30384-5386	Line <u>3.156</u>	<u>4203</u>
		<input type="checkbox"/> Not listed. Explain _____	

Debtor	Alliance Laundry & Textile Service, LLC Name	Case number (if known)	18-31755-5
Name and mailing address		On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.29	Stericycle, Inc. 28161 N. Keith Drive Lake Forest, IL 60045	Line <u>3.159</u>	<u>9204</u>
		<input type="checkbox"/> Not listed. Explain _____	
4.30	Teems Electric Company c/o Spears, Moore, Rebman & Williams Attn: Cara Weiner, Esq. 601 Market Street, Suite 400 Chattanooga, TN 37402	Line <u>3.166</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.31	Thermopatch Corporation 2204 Erie Boulevard East Syracuse, NY 13224	Line <u>3.170</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.32	Thermopatch Corporation 2204 Erie Boulevard East Syracuse, NY 13224	Line <u>3.171</u>	<u>1267</u>
		<input type="checkbox"/> Not listed. Explain _____	
4.33	Tingue, Brown & Co. P.O. Box 824619 Philadelphia, PA 19182-4619	Line <u>3.172</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.34	TLC Tri-State Laundry Companies 1560 Old Clyattville Road Valdosta, GA 31601	Line <u>3.175</u>	<u>Alliance LTS</u>
		<input type="checkbox"/> Not listed. Explain _____	
4.35	TLC Tri-State Laundry Companies P.O. Box 69 Valdosta, GA 31603-0069	Line <u>3.175</u>	<u>Alliance LTS</u>
		<input type="checkbox"/> Not listed. Explain _____	
4.36	TLC Tri-State Laundry Companies 1560 Old Clyattville Road Valdosta, GA 31601	Line <u>3.176</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.37	Vaspian LLC 266 Oak Street Buffalo, NY 14203	Line <u>3.181</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.38	Vaspian LLC 266 Oak Street Buffalo, NY 14203	Line <u>3.182</u>	—
		<input type="checkbox"/> Not listed. Explain _____	
4.39	Wellstar Health System, Inc. c/o Moore Ingram Johnson & Steele, LLP Emerson Overlook 326 Roswell Street, Suite 100 Marietta, GA 30060	Line <u>3.189</u>	—
		<input type="checkbox"/> Not listed. Explain _____	

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1
5b. Total claims from Part 2

		Total of claim amounts
5a.	\$	<u>170,277.24</u>
5b.	+	<u>3,967,677.39</u>

Debtor Alliance Laundry & Textile Service, LLC
Name _____

Case number (if known) 18-31755-5

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

5c. \$ 4,137,954.63

Fill in this information to identify the case:

Debtor name Alliance Laundry & Textile Service, LLCUnited States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORKCase number (if known) 18-31755-5 Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

 No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form. Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1.	State what the contract or lease is for and the nature of the debtor's interest	Lease for single story masonry building containing approximately 52,066 square feet of space located at 1631 Willingham Drive, East Point, Georgia dated December 3, 2001 and as amended by First Amendment to Lease Agreement dated October 31, 2017; term of lease extended for additional 10 years approximatey 9 years	State the term remaining	1631 Willingham BT, LLC 700 Promontory Point Lane, Unit 1401 San Mateo, CA 94404
	List the contract number of any government contract			
2.2.	State what the contract or lease is for and the nature of the debtor's interest	Contract with the United States of America for linen service at Moody Air Force Base Clinic, Georgia dated October 1, 2016	State the term remaining	23 Contracting Squadron - FA4830 4380B Alabama Road, Bldg. 932 Moody A F B, GA 31699-1794
	List the contract number of any government contract	FA4830-16-C-0007		
2.3.	State what the contract or lease is for and the nature of the debtor's interest	Customer Contract; EastPoint	State the term remaining	ABM Lanier-Hunt Airport Parking 6033 South Terminal Parkway Atlanta, GA 30321-9999
	List the contract number of any government contract			

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.4. State what the contract or lease is for and the nature of the debtor's interest
 Schedule of Protection, Proposal and Sales Agreement dated May 30, 2018 (East Point location)

State the term remaining

List the contract number of any government contract

ADT Protection1
 P.O. Box 49292
 Wichita, KS 67201

2.5. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract; EastPoint

State the term remaining

List the contract number of any government contract

Amtran Medical Transportation, Inc.
 14 Redmond Ct. NW
 Rome, GA 30165-1244

2.6. State what the contract or lease is for and the nature of the debtor's interest
 Partners Cooperative Laundry Service Agreement with Archbold Memorial Hospital and Participating Hospital Agreement;Tri-State

State the term remaining

List the contract number of any government contract

Amulatory Care Center
 947 S. Broad Street
 Thomasville, GA 31792-6161

2.7. State what the contract or lease is for and the nature of the debtor's interest
 Linen Service Agreement dated June 17, 2013; contract expires June 30, 2020

State the term remaining

List the contract number of any government contract

AnMed Health
 2000 East Greenville Street
 Anderson, SC 29621

2.8. State what the contract or lease is for and the nature of the debtor's interest
 Linen Service Agreement with AnMed Health dated June 17, 2013; contract expires June 30, 2020; Spartanburg

State the term remaining

List the contract number of any government contract

AnMed Health Cannon
 123 WG Acker Drive
 Pickens, SC 29671-2739

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.9.	State what the contract or lease is for and the nature of the debtor's interest	Linen Service Agreement with AnMed Health dated June 17, 2013; contract expires June 30, 2020; Spartanburg
	State the term remaining	
	List the contract number of any government contract	AnMed Health Medical Center 800 N. Fant Street Anderson, SC 29621-5708
2.10.	State what the contract or lease is for and the nature of the debtor's interest	Linen Service Agreement with AnMed Health dated June 17, 2013; contract expires June 30, 2020; Spartanburg
	State the term remaining	
	List the contract number of any government contract	AnMed Health North Campus 2000 E. Greenville Street Anderson, SC 29621-1580
2.11.	State what the contract or lease is for and the nature of the debtor's interest	Linen Service Agreement with AnMed Health dated June 17, 2013; contract expires June 30, 2020; Spartanburg
	State the term remaining	
	List the contract number of any government contract	AnMed Health Sleep Lab 355 Old Greenville Road Spartanburg, SC 29301-4755
2.12.	State what the contract or lease is for and the nature of the debtor's interest	Linen Service Agreement with AnMed Health dated June 17, 2013; contract expires June 30, 2020; Spartanburg
	State the term remaining	
	List the contract number of any government contract	AnMed Health Wound & Hyperbaric Medicine 2000 E. Greenville Street, Ste. 5110 Anderson, SC 29621-1763
2.13.	State what the contract or lease is for and the nature of the debtor's interest	Partners Cooperative Laundry Service Agreement dated September 1, 2013 and Participating Hospital Agreement dated May 25, 2017; contract expires July 31, 2019; Tri-State
	State the term remaining	
	List the contract number of any government contract	Archbold Memorial Hospital, Inc. 915 Gordon Avenue Thomasville, GA 31792-6614

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.14. State what the contract or lease is for and the nature of the debtor's interest

Partners Cooperative
Laundry Service
Agreement with Archbold
Memorial Hospital and
Participating Hospital
Agreement;Tri-State

State the term remaining

List the contract number of any government contract

Archbold Primary Care
2621 E. Pinetree Blvd.
Thomasville, GA 31792-4840

2.15. State what the contract or lease is for and the nature of the debtor's interest

Partners Cooperative
Laundry Service
Agreement with Archbold
Memorial Hospital and
Participating Hospital
Agreement;Tri-State

State the term remaining

List the contract number of any government contract

Archbold Sleep Center
114 Momosa Drive, Ste D
Thomasville, GA 31792-6679

2.16. State what the contract or lease is for and the nature of the debtor's interest

Partners Cooperative
Laundry Service
Agreement with Archbold
Memorial Hospital and
Participating Hospital
Agreement; Tri-State

State the term remaining

List the contract number of any government contract

Bainbridge Specialty Clinic
1323 E. Shotwell Street
Bainbridge, GA 39819-4252

2.17. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Spartanburg

State the term remaining

List the contract number of any government contract

BG Neurology
1071 Boiling Springs Road
Spartanburg, SC 29303-2201

2.18. State what the contract or lease is for and the nature of the debtor's interest

Partners Cooperative
Laundry Service
Agreement with Archbold
Memorial Hospital and
Participating Hospital
Agreement; Tri-State

State the term remaining

List the contract number of any

Brooks County Hospital
903 N. Court Street
Quitman, GA 31643-1315

Debtor 1 Alliance Laundry & Textile Service, LLC

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

government contract

2.19. State what the contract or lease is for and the nature of the debtor's interest

Partners Cooperative Laundry Service
Agreement with Archbold
Memorial Hospital and
Participating Hospital
Agreement; Tri-State

State the term remaining

List the contract number of any government contract

Cardio Consultants of South Georgia
100 Mimosa Drive
Thomasville, GA 31792-6676

2.20. State what the contract or lease is for and the nature of the debtor's interest

Customer
Contract;Tri-State

State the term remaining

List the contract number of any government contract

Carlton Breast Center At Meredyth Place
2709 Meredyth Drive, Ste 260
Albany, GA 31707-0218

2.21. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Spartanburg

State the term remaining

List the contract number of any government contract

Carolina Center for Behavioral Health
2700 E. Phillips Road
Greer, SC 29650-4815

2.22. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Spartanburg

State the term remaining

List the contract number of any government contract

Carolina Orthopaedic & Neurologic Assoc.
1330 Boiling Springs Road, Ste 1600
Spartanburg, SC 29303-4219

2.23. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
EastPoint

State the term remaining

List the contract number of any government contract

Center for Advanced Rehabilitation
110 Park City Road
Rossville, GA 30741-3980

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.24. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract; EastPoint

State the term remaining

Center for Advanced Rehabilitation
SACU 3rd Floor
100 Gross Crescent Circle
Fort Oglethorpe, GA 30742-3643

List the contract number of any government contract

2.25. State what the contract or lease is for and the nature of the debtor's interest
Lease dated March 13, 2012 for 2 2013 Great Dane Trailers for the East Point plant; term of lease is 120 months and expires August 31, 2022
Approx. 3 years and 5 months

State the term remaining

Commercial Trailer Leasing, Inc.
103 Eisenhower Parkway, Suite 300
Roseland, NJ 07068

List the contract number of any government contract

2.26. State what the contract or lease is for and the nature of the debtor's interest
Lease dated May 23, 2012 for a 2013 Great Dane Trailer for the East Point plant; term of lease is 120 months and expires August 31, 2022
Approx. 3 years and 7 months

State the term remaining

Commercial Trailer Leasing, Inc.
103 Eisenhower Parkway, Suite 300
Roseland, NJ 07068

List the contract number of any government contract

2.27. State what the contract or lease is for and the nature of the debtor's interest
Lease dated July 26, 2011 for 2 2012 Great Dane Utility Trailers for the Spartanburg plant; term of lease is 96 months and expires January 31, 2020
Approx. 9 months

State the term remaining

Commercial Trailer Leasing, Inc.
103 Eisenhower Parkway, Suite 300
Roseland, NJ 07068

List the contract number of any government contract

2.28. State what the contract or lease is for and the nature of the debtor's interest
Lease dated July 26, 2011 for a Great Dane Trailer for the Spartanburg plant; term of lease is 96 months and expires July 31, 2021
Approx. 9 months

State the term remaining

Commercial Trailer Leasing, Inc.
103 Eisenhower Parkway, Suite 300
Roseland, NJ 07068

List the contract number of any government contract

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract _____

2.29. State what the contract or lease is for and the nature of the debtor's interest
 Gas Supply Agreement dated November 26, 2018 for Spartanburg location; delivery term is January 1, 2019 through December 31, 2019
 State the term remaining _____
 List the contract number of any government contract _____
 Constellation NewEnergy - Gas Division
 9960 Corporate Campus Drive
 Suite 2000
 Louisville, KY 40223

2.30. State what the contract or lease is for and the nature of the debtor's interest
 Employment contract dated October 10, 2018
 State the term remaining _____
 List the contract number of any government contract _____
 Daisy Mvou
 2300 County Walk
 Apt. 916
 Snellville, GA 30039

2.31. State what the contract or lease is for and the nature of the debtor's interest
 Non-Compete and Non-Solicitation Agreement dated April 12, 2017
 State the term remaining _____
 List the contract number of any government contract _____
 David M. Krawczyk
 229 Hearthwood Lane
 Simpsonville, SC 29681

2.32. State what the contract or lease is for and the nature of the debtor's interest
 Equipment Lease Agreement dated February 18, 2016 for lease of Mitsubishi Class IV-IC Custom Forklift; Model No. FG25; Serial Number AF82F30268
 State the term remaining _____
 List the contract number of any government contract _____
 De Lage Landen Financial Services, Inc.
 Attn: Lease Processing Center
 1111 Old Eagle School Road
 Wayne, PA 19087

2.33. State what the contract or lease is for and the nature of the debtor's interest
 Equipment Lease Agreement dated October 19, 2017 for a Sharp MC-4050N Copier; term of Lease is 48 months
 State the term remaining _____
 List the contract number of any government contract _____
 De Lage Landen Financial Services, Inc.
 Attn: Lease Processing Center
 1111 Old Eagle School Road
 Wayne, PA 19087-8608

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract _____

2.34. State what the contract or lease is for and the nature of the debtor's interest

Contract with United States of America for linen service to the Veterans Administration in Augusta, Georgia dated August 1, 2017

State the term remaining _____

List the contract number of any government contract

VA247-17-D-0138

Department of Veterans Affairs
VISN 7 Network Contracting Activity
501 Greene Street
Hatcher Building - Suite 2
Augusta, GA 30901

2.35. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
EastPoint

State the term remaining _____

List the contract number of any government contract

Dunwoody Urgent Care
1730 Mount Vernon Road
Atlanta, GA 30338-4245

2.36. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Spartanburg

State the term remaining _____

List the contract number of any government contract

Eden Terrace of Spartanburg
2780 E. Main Street
Spartanburg, SC 29307-1248

2.37. State what the contract or lease is for and the nature of the debtor's interest

Contract with United States of America for linen service at Martin Army Community Hospital, Fort Benning, Georgia dated October 1, 2014

State the term remaining _____

List the contract number of any government contract

W81K00-14-C-0096

EMB, BMACH
Martin Army Community Hospital
7950 Martin Loop
Fort Benning, GA 31905

2.38. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
EastPoint

State the term remaining _____

List the contract number of any government contract

EP Star Wipers, Inc. - RAGS
1125 E. Main Street
Newark, OH 43055-8869

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.39.	State what the contract or lease is for and the nature of the debtor's interest	Staffing Agreement dated July 10, 2017	Express Services, Inc. d/b/a Express Employment Professionals P.O. Box 535434 Atlanta, GA 30353-5434
	State the term remaining		
	List the contract number of any government contract		
2.40.	State what the contract or lease is for and the nature of the debtor's interest	Customer Contract; EastPoint	Family Medical Center 1657 N. Expressway Griffin, GA 30223-1276
	State the term remaining		
	List the contract number of any government contract		
2.41.	State what the contract or lease is for and the nature of the debtor's interest	Customer Contract; EastPoint	First Georgia Physician Group 4000 Shakerag Hill, Ste 3201 Peachtree City, GA 30269-4047
	State the term remaining		
	List the contract number of any government contract		
2.42.	State what the contract or lease is for and the nature of the debtor's interest	Customer Contract; EastPoint	First Georgia Physician Group 101 Yorktown Drive, Suite 100 Fayetteville, GA 30214
	State the term remaining		
	List the contract number of any government contract		
2.43.	State what the contract or lease is for and the nature of the debtor's interest	Customer Contract; EastPoint	First Georgia Physician Group 101 Yorktown Drive, Suite 100 Fayetteville, GA 30214
	State the term remaining		
	List the contract number of any government contract		
2.44.	State what the contract or lease is for and the nature of the debtor's interest	Participating Hospital Agreement/Laundry Service Agreement dated September 1, 2013; contract expires November 1, 2020	Floyd Healthcare Management, Inc. 304 Turner McCall Boulevard Rome, GA 30165

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**State the term remaining
Approximately 1 year, 11 months

List the contract number of any government contract

2.45. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract; Spartanburg and Austell locations

State the term remaining

List the contract number of any government contract

Fort Jackson
Building 3295 Forney Street
Columbia, SC 292022.46. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract; EastPoint

State the term remaining

List the contract number of any government contract

Fresenius Medical Care of Duluth-Lawrenceville
1115 Herrington Road
Lawrenceville, GA 30044-75032.47. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract; EastPoint

State the term remaining

List the contract number of any government contract

Fresenius Medical Care of DeKalb/Rockdale
6085 Hillandale Drive
Lithonia, GA 30058-48392.48. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract; EastPoint

State the term remaining

List the contract number of any government contract

Fresenius Medical Care of Decatur
2721 Irvin Way
Decatur, GA 30030-17202.49. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract; EastPoint

State the term remaining

List the contract number of any government contract

Fresenius Medical Care of Honey Creek
1901 Honey Creek Commons SE
Conyers, GA 30013-5806

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.50.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Linen Service Agreement dated July 1, 2018; contract expires June 30, 2019 Approximately 8 months _____	GA State Univ. Student Health Clinic 141 Piedmont Avenue, NE Suite D Atlanta, GA 30303-2417
2.51.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Customer Contract; EastPoint _____	Georgia Baptist College of Nursing Mercer University 3001 Mercer University Drive Atlanta, GA 30341-4115
2.52.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Customer Contract; EastPoint _____	Georgia Breast Surgery, PC 631 Professional Drive, Ste 240 Lawrenceville, GA 30046-3367
2.53.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Customer Contract; Spartanburg _____	Georgia Regional Hospital 1915 Eisenhower Drive Savannah, GA 31406-5027
2.54.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Partners Cooperative Laundry Service Agreement with Archbold Memorial Hospital and Participating Hospital Agreement; Tri-State _____	Glenn-Mor Nursing Home 10629 US Highway 19 S Thomasville, GA 31792-1127
2.55.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining	Customer Contract; Tri-State _____	GoldStar EMS 1607 North Martin Luther King Jr. Blvd. Americus, GA 31719

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract

2.56. State what the contract or lease is for and the nature of the debtor's interest

Partners Cooperative Laundry Service Agreement with Archbold Memorial Hospital and Participating Hospital Agreement; Tri-State

State the term remaining

List the contract number of any government contract

Grady General Hospital
1182 5th Street SE
Cairo, GA 39828-3141

2.57. State what the contract or lease is for and the nature of the debtor's interest

Participating Hospital Agreement/Laundry Service Agreement dated September 1, 2013; contract expires November 1, 2020

State the term remaining

List the contract number of any government contract

Gwinnett Medical Center
1000 Medical Center Boulevard
Lawrenceville, GA 30046

2.58. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Spartanburg

State the term remaining

List the contract number of any government contract

Home Hospice Nurses-Direct Sale
1530 Drayton Road
Spartanburg, SC 29307

2.59. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Spartanburg

State the term remaining

List the contract number of any government contract

Hospice of Laurens County
1304 Springdale Drive
Clinton, SC 29325-7226

2.60. State what the contract or lease is for and the nature of the debtor's interest

Linen Service Agreement dated January 15, 2016; contract expires January 14, 2019

State the term remaining

List the contract number of any government contract

Hospice of the Upstate, Inc.
Attn: Pamela S. Melbourne, President
1835 Rogers Road
Anderson, SC 29621

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.61.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Subcontract Service Agreement dated May 1, 2016; contract expires April 30, 2021 Approximately 2 years and 6 months</p>	<p>Hospital Services, Inc. 2751 The Boulevard Columbia, SC 29209</p>
2.62.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Linen Service Agreement with Houston Hospitals, Inc. dated September 1, 2018; contract expires August 31, 2021; EastPoint</p>	<p>Houston Health Pavilion 233 N. Houston Road Warner Robins, GA 31093-3024</p>
2.63.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Linen Service Agreement dated September 1, 2018; contract expires August 31, 2021 Approximatley 2 years and 10 months</p>	<p>Houston Hospitals, Inc. d/b/a Houston Healthcare 1601 Watson Boulevard Warner Robins, GA 31093</p>
2.64.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Linen Service Agreement with Houston Hospitals, Inc. dated September 1, 2018; contract expires August 31, 2021; EastPoint</p>	<p>Houston Medical Center c/o Houston Hospitals, Inc. 1601 Watson Blvd. Warner Robins, GA 31093</p>
2.65.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Linen Service Agreement with Houston Hospitals, Inc. dated September 1, 2018; contract expires August 31, 2021; EastPoint</p>	<p>Houston Perry Hospital 1120 Morningside Drive Perry, GA 31069-2906</p>

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.66. State what the contract or lease is for and the nature of the debtor's interest
 Linen Service Agreement with Houston Hospitals, Inc. dated September 1, 2018; contract expires August 31, 2021; EastPoint
 State the term remaining
 List the contract number of any government contract
 Houston Surgery Center
 1659 Watson Blvd.
 Warner Robins, GA 31093-3431

2.67. State what the contract or lease is for and the nature of the debtor's interest
 Staffing Services Agreement dated July 10, 2017
 State the term remaining
 List the contract number of any government contract
 Integra Business Alternatives, Inc.
 1704 N. Slapley Blvd.
 Columbus, GA 31901

2.68. State what the contract or lease is for and the nature of the debtor's interest
 Linen Control Subscription Agreement dated March 11, 2015 for a ScrubEx MV Dispenser/Receiver Unit and Web Based Management Software ScrubEx/alEx; Equipment Addendum dated April 3, 2015
 State the term remaining
 List the contract number of any government contract
 IPA One
 10712 South 1300 East
 Sandy, UT 84094

2.69. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract; Tri-State
 State the term remaining
 List the contract number of any government contract
 Joe-Anne Burgin Nursing Home
 321 Randolph Street
 Cuthbert, GA 39840-6127

2.70. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract; EastPoint
 State the term remaining
 List the contract number of any government contract
 Judson G. Black, MD LLC
 755 Mount Vernon Hwy NE, Ste 430
 Atlanta, GA 30328-4279

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.71. State what the contract or lease is for and the nature of the debtor's interest
 Non-Compete and Non-Solicitation Agreement dated July 31, 2018

State the term remaining

List the contract number of any government contract

Kendric McCarty
 3399 Bent hollow Lane
 Duluth, GA 30096

2.72. State what the contract or lease is for and the nature of the debtor's interest
 Partners Cooperative Laundry Service Agreement with Archbold Memorial Hospital and Participating Hospital Agreement; Tri-State

State the term remaining

List the contract number of any government contract

Lewis Hall Singletary Oncology Center
 919 S. Broad Street
 Thomasville, GA 31792-6114

2.73. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract; EastPoint

State the term remaining

List the contract number of any government contract

Linen Replacement in Excess of Allowance
 1631 Willingham Drive
 Atlanta, GA 30344-4810

2.74. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract; Spartanburg

State the term remaining

List the contract number of any government contract

Linen Replacement in Excess of Allowance
 355 Old Greenville Road
 Spartanburg, SC 29301-4755

2.75. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract; Tri-State

State the term remaining

List the contract number of any government contract

Linen Replacement in Excess of Allowance
 404 Hodges Avenue
 Albany, GA 31701-1614

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.76. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract;
 Spartanburg

State the term remaining

Lung & Chest Medical Associates
 2030 N. Church Street Place
 Spartanburg, SC 29303-2706

List the contract number of any government contract

2.77. State what the contract or lease is for and the nature of the debtor's interest
 Contract with United States of America for linen services at Martin Army Community Hospital, Fort Benning, Georgia dated September 13, 2016 and modified as of December 14, 2017

State the term remaining

Martin Army Hospital
 7950 Martin Loop
 Fort Benning, GA 31905-5648

List the contract number of any government contract

W81K00-14-C-0096

2.78. State what the contract or lease is for and the nature of the debtor's interest
 Linen Service Agreement dated July 17, 2013; contract expires June 18, 2019

State the term remaining

Mary Black Health System LLC
 1700 Skyline Drive
 Spartanburg, SC 29304

List the contract number of any government contract

2.79. State what the contract or lease is for and the nature of the debtor's interest
 Linen Service Agreement with Mary Black Health System LLC dated July 17, 2013; contract expires June 18, 2019; Spartanburg

State the term remaining

Mary Black Memorial Hospital
 1700 Skylyn Drive
 Spartanburg, SC 29307-1041

List the contract number of any government contract

2.80. State what the contract or lease is for and the nature of the debtor's interest
 Linen Service Agreement with Mary Black Health System LLC dated July 17, 2013; contract expires June 18, 2019; Spartanburg

State the term remaining

MBMH Outpatient Therapy Services
 1650 Skylyn Drive, Ste 100
 Spartanburg, SC 29307-1069

List the contract number of any government contract

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.81.	State what the contract or lease is for and the nature of the debtor's interest	Linen Service Agreement with Mary Black Health System LLC dated July 17, 2013; contract expires June 18, 2019; Spartanburg
	State the term remaining	
	List the contract number of any government contract	MBMH Women's Breast Health Center 1650 Skylyn Drive, Ste 130 Spartanburg, SC 29307-1069
2.82.	State what the contract or lease is for and the nature of the debtor's interest	Customer Contract; EastPoint
	State the term remaining	
	List the contract number of any government contract	MEM Ooltewah Imaging Center 6401 Mountain View Road Ooltewah, TN 37363-6681
2.83.	State what the contract or lease is for and the nature of the debtor's interest	Customer Contract; EastPoint
	State the term remaining	
	List the contract number of any government contract	Midtown Neurology PC 285 Boulevard NE, Ste 345 Atlanta, GA 30312-4201
2.84.	State what the contract or lease is for and the nature of the debtor's interest	Partners Cooperative Laundry Service Agreement with Archbold Memorial Hospital and Participating Hospital Agreement; Tri-State
	State the term remaining	
	List the contract number of any government contract	Mitchell Convalescent Center 37 S. Ellis Street Camilla, GA 31730-1812
2.85.	State what the contract or lease is for and the nature of the debtor's interest	Partners Cooperative Laundry Service Agreement with Archbold Memorial Hospital and Participating Hospital Agreement;Tri-State
	State the term remaining	
	List the contract number of any government contract	Mitchell County Hospital 90 E. Stephens Street Camilla, GA 31730-1836

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.86.	State what the contract or lease is for and the nature of the debtor's interest	Contract with United States of America for linen services at Moncrief Army Health Clinic, Fort Jackson, South Carolina dated May 1, 2018; and Contract with the United States of America for linen service at Moncrief Army Health Clinic, Fort Jackson, South Carolina dated November 1, 2018
	State the term remaining	
	List the contract number of any government contract	Moncrief Army Health Clinic 4500 Stuart Avenue Columbia, SC 29207-5700
2.87.	State what the contract or lease is for and the nature of the debtor's interest	Contract with United States of America for linen services at Moody Air Force Base in Georgia dated October 1, 2018; Tri-State
	State the term remaining	
	List the contract number of any government contract	Moody Air Force Base Clinic 3276 Mitchell Blvd. Moody A F B, GA 31699-1500
2.88.	State what the contract or lease is for and the nature of the debtor's interest	Customer Contract;Tri-State
	State the term remaining	
	List the contract number of any government contract	Morningside of Albany 1721 Beattie Road Albany, GA 31721-2911
2.89.	State what the contract or lease is for and the nature of the debtor's interest	Laundry Service Agreement dated September 1, 2013 and Participating Hospital Agreement dated October 8, 2013
	State the term remaining	
	List the contract number of any government contract	Northeast Georgia Hospital System 743 Spring Street Gainesville, GA 30501-3899

First Name Middle Name Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.90.	State what the contract or lease is for and the nature of the debtor's interest	Partners Cooperative Laundry Service Agreement dated September 1, 2013 and Participating Hospital Agreement with Northeast Georgia Hospital System dated October 8, 2013 (EastPoint location)	State the term remaining _____	Northeast Georgia Medical Center Barrow 316 N. Broad Street Winder, GA 30680-2150
2.91.	State what the contract or lease is for and the nature of the debtor's interest	Partners Cooperative Laundry Service Agreement with Archbold Memorial Hospital and Participating Hospital Agreement for Tri-State location;	State the term remaining _____	Northside Center for Behavioral & Psychiatric Care 401 Old Albany Road Thomasville, GA 31792-4014
2.92.	State what the contract or lease is for and the nature of the debtor's interest	Customer Contract; Spartanburg	State the term remaining _____	Orthopedic Specialties 303 E. Wood Street Spartanburg, SC 29303-3020
2.93.	State what the contract or lease is for and the nature of the debtor's interest	Customer Contract; Spartanburg	State the term remaining _____	Palmetto Hematology Oncology- Union 407 W. South Street Union, SC 29379-2771

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.94.	State what the contract or lease is for and the nature of the debtor's interest	Linen Services Agreement dated September 1, 2013; associated with Participating Hospital Agreement with Northeast Georgia Hospital System; contract expires November 1, 2020	Partners Cooperative, Inc. 3625 Cumberland Boulevard, SE Suite #1425 Atlanta, GA 30339
	State the term remaining	Approximately 1 year, 11 months	
	List the contract number of any government contract		
2.95.	State what the contract or lease is for and the nature of the debtor's interest	Partners Cooperative Laundry Service Agreement with Archbold Memorial Hospital and Participating Hospital Agreement for Tri-State location;	Pelham Parkway Nursing Home 608 Dogwood Drive NE Pelham, GA 31779-1132
	State the term remaining		
	List the contract number of any government contract		
2.96.	State what the contract or lease is for and the nature of the debtor's interest	Vehicle Lease Service Agreement dated December 10, 2014 for a Freightliner Truck for the Spartanburg plant; Lease Nos. 136746 and 136750 expire January 31, 2021 and Lease Nos. 136747, 136748 and 136749 expire December 31, 2020	Penske Truck Leasing Co., LP P.O. Box 532658 Atlanta, GA 30353-2658
	State the term remaining		
	List the contract number of any government contract		
2.97.	State what the contract or lease is for and the nature of the debtor's interest	Vehicle Lease Service Agreement dated November 4, 2015 for a Freightliner Truck for the Spartanburg plant; Lease Nos. 160110 and 160111 expire October 31, 2022 and Lease No. 160113 expires April 30, 2020	Penske Truck Leasing Co., LP P.O. Box 532658 Atlanta, GA 30353-2658
	State the term remaining		

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract _____

2.98. State what the contract or lease is for and the nature of the debtor's interest

Vehicle Lease Service
Agreement dated
February 3, 2016 for a
Freightliner for the
Spartanburg plant; Lease
expires August 31, 2021

State the term remaining

List the contract number of any government contract _____

Penske Truck Leasing Co., LP
P.O. Box 532658
Atlanta, GA 30353-2658

2.99. State what the contract or lease is for and the nature of the debtor's interest

Vehicle Lease Service
Agreement effective
December 20, 2012;
Lease expires January
31, 2019

State the term remaining

List the contract number of any government contract _____

Penske Truck Leasing Co., LP
P.O. Box 532658
Atlanta, GA 30353-2658

2.100. State what the contract or lease is for and the nature of the debtor's interest

Vehicle Lease Service
Agreement dated
January 7, 2013; Lease
expires April 30, 2019

State the term remaining

List the contract number of any government contract _____

Penske Truck Leasing Co., LP
P.O. Box 532658
Atlanta, GA 30353-2658

2.101. State what the contract or lease is for and the nature of the debtor's interest

Vehicle Lease Service
Agreement effective
August 1, 2013; Lease
expires August 31, 2019

State the term remaining

List the contract number of any government contract _____

Penske Truck Leasing Co., LP
P.O. Box 532658
Atlanta, GA 30353-2658

2.102. State what the contract or lease is for and the nature of the debtor's interest

Employment Services
Agreement dated July
10, 2017

State the term remaining

List the contract number of any government contract _____

PeopleReady Inc.
1015 "A" Street
Tacoma, WA 98402

Debtor 1 Alliance Laundry & Textile Service, LLC

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.103. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;Tri-State

State the term remaining

Phoebe Community Care Clinic
417 W. 4th Avenue
Albany, GA 31701-1915

List the contract number of any government contract

2.104. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

Phoebe Community Benefit
417 W. 3rd Avenue
Albany, GA 31701-1943

List the contract number of any government contract

2.105. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

Phoebe Diagnostics Imaging Center
2709 Meredyth Drive, Ste. 100
Albany, GA 31707-0222

List the contract number of any government contract

2.106. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

Phoebe Endoscopy Center
2709 Meredyth Drive
Albany, GA 31707-0222

List the contract number of any government contract

2.107. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

Phoebe Family Medical Center - Albany
901 N. Madison Street
Albany, GA 31701-2210

List the contract number of any government contract

2.108. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

Phoebe Family Medical Center - Camilla
48 US Highway 19 S
Camilla, GA 31730-1960

List the contract number of any government contract

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract _____

2.109. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining _____

List the contract number of any government contract _____

Phoebe Family Medical Center - Pelham
410 Curry Street NE
Pelham, GA 31779-1457

2.110. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining _____

List the contract number of any government contract _____

Phoebe Family Medical Center- Laurel Pl.
1390 US Highway 19 S
Leesburg, GA 31763-4831

2.111. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining _____

List the contract number of any government contract _____

Phoebe Gastroenterology Associates
2709 Meredyth Drive
Albany, GA 31707-0222

2.112. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining _____

List the contract number of any government contract _____

Phoebe Healthworks
311 W. 3rd Avenue
Albany, GA 31701-2093

2.113. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining _____

List the contract number of any government contract _____

Phoebe Infectious Disease
1950 Palmyra Road
Albany, GA 31701

2.114. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

Phoebe Neurology Associates
2709 Meredyth Drive, Ste 230
Albany, GA 31707-0218

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining

List the contract number of any government contract

2.115. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract

Phoebe Neurosurgical Associates
2622 Meredyth Drive
Albany, GA 31707-0206

2.116. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract

Phoebe Northwest
2336 Dawson Road
Albany, GA 31707-2800

2.117. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract

Phoebe Orthopaedic Specialty Group
2709 Meredyth Drive, Ste 450
Albany, GA 31707-0220

2.118. State what the contract or lease is for and the nature of the debtor's interest

Linen Service Agreement
dated August 1, 2016,
together with Addendum
to Linen Service
Agreement dated July
27, 2017

State the term remaining

List the contract number of any government contract

Phoebe Putney Memorial Hospital
417 W. 3rd Avenue
Albany, GA 31701-1943

2.119. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract

Phoebe Putney Memorial Hospital
North Campus
2000 Palmyra Road
Albany, GA 31701-1528

Debtor 1 Alliance Laundry & Textile Service, LLC

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.120. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract;
 Tri-State

State the term remaining

List the contract number of any government contract

 Phoebe Rheumatology
 901 N. Madison Street
 Albany, GA 31701-2210

2.121. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract;
 Tri-State

State the term remaining

List the contract number of any government contract

 Phoebe Sickle Cell Clinic
 1009 N. Monroe Street, Ste B
 Albany, GA 31701-1970

2.122. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract;
 Tri-State

State the term remaining

List the contract number of any government contract

 Phoebe Sleep Disorders Center
 2709 Meredyth Drive, Ste 310
 Albany, GA 31707-0219

2.123. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract;
 Tri-State

State the term remaining

List the contract number of any government contract

 Phoebe Sumter Medical Center
 126 US Highway 280 W.
 Americus, GA 31719-8645

2.124. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract;
 Tri-State

State the term remaining

List the contract number of any government contract

 Phoebe Sumter OB/GYN
 126 US Highway 280 W.
 Americus, GA 31719-8645

2.125. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract;
 Tri-State

State the term remaining

 Phoebe Sumter Orthopedics
 132 US Highway 280 W.
 Americus, GA 31719-8645

Debtor 1 Alliance Laundry & Textile Service, LLC

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

List the contract number of any government contract _____

2.126. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract _____

Phoebe Sumter Surgical Associates
120 US Highway 280 W
Americus, GA 31719-86452.127. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract _____

Phoebe Sumter Wellness & Educ. Center
132 US Highway 280 W.
Americus, GA 31719-86452.128. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract _____

Phoebe Tower Medical at Meredyth Place
2709 Meredyth Drive, Ste 330
Albany, GA 31707-02132.129. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract _____

Phoebe Worth Family Medicine - Sylvester
1014 W. Franklin Street
Sylvester, GA 31791-19712.130. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract _____

Phoebe Worth Medical Center
807 S. Isabella Street
Sylvester, GA 31791-7554

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.131. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

Phoebe Wound Care & Hyperbaric Center
803 N. Jefferson Street
Albany, GA 31701-2373

List the contract number of any government contract

2.132. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

Premier Orthopedics
2405 Osler Court, STE 100
Albany, GA 31707-0215

List the contract number of any government contract

2.133. State what the contract or lease is for and the nature of the debtor's interest

Non-Compete and Non-Solicitation Agreement dated January 8, 2018

State the term remaining

R. Allen Simmons
14 Red Jonathan Court
Simpsonville, SC 29681

List the contract number of any government contract

2.134. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

Randolph Medical Associates
125 McDonald Avenue
Cuthbert, GA 39840-5829

List the contract number of any government contract

2.135. State what the contract or lease is for and the nature of the debtor's interest

Linen Service Agreement dated August 1, 2018; contract expires July 31, 2021

State the term remaining

Regional Medical Center of Orangeburg and Calhoun Counties
3000 Saint Matthews Road
Orangeburg, SC 29118-1442

List the contract number of any government contract

2.136. State what the contract or lease is for and the nature of the debtor's interest

Non-Compete and Non-Solicitation Agreement dated February 28, 2017

State the term remaining

Richard Leatherwood
1370 Hanging Rock Road
Boiling Springs, SC 29316

List the contract number of any government contract

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract _____

2.137. State what the contract or lease is for and the nature of the debtor's interest

Linen Service Agreement with Regional Medical Center of Orangeburg and Calhoun Counties dated August 1, 2018; contract expires July 31, 2021 (Spartanburg location)

State the term remaining _____

List the contract number of any government contract _____

RMCO Healthplex
3000 Saint Matthews Road
Orangeburg, SC 29118-1442

2.138. State what the contract or lease is for and the nature of the debtor's interest

Linen Service Agreement with Regional Medical Center of Orangeburg and Calhoun Counties dated August 1, 2018; contract expires July 31, 2021 (Spartanburg location)

State the term remaining _____

List the contract number of any government contract _____

RMCO Healthplex - Holly Hill
187 Bunch Ford Road
Holly Hill, SC 29059-8224

2.139. State what the contract or lease is for and the nature of the debtor's interest

Linen Service Agreement with Regional Medical Center of Orangeburg and Calhoun Counties dated August 1, 2018; contract expires July 31, 2021 (Spartanburg location)

State the term remaining _____

List the contract number of any government contract _____

RMCO Healthplex - Santee
111 John Lawson Avenue
Santee, SC 29142-8654

2.140. State what the contract or lease is for and the nature of the debtor's interest

Linen Service Agreement with Regional Medical Center of Orangeburg and Calhoun Counties dated August 1, 2018; contract expires July 31, 2021 (Spartanburg location)

State the term remaining _____

List the contract number of any government contract _____

RMCO Urgent Care - Bamburg
185 McGee Street
Bamberg, SC 29003-1154

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.141. State what the contract or lease is for and the nature of the debtor's interest
Non-Compete and Non-Solicitation Agreement dated October 27, 2017

State the term remaining

List the contract number of any government contract

Robert J. Hawkins
744 September Chase
Wellford, SC 29385

2.142. State what the contract or lease is for and the nature of the debtor's interest
Non-Compete and Non-Solicitation Agreement dated January 10, 2018

State the term remaining

List the contract number of any government contract

Rossu Smith
4801 Impala Lane
Albany, GA 31705

2.143. State what the contract or lease is for and the nature of the debtor's interest
Truck Lease and Service Agreement dated February 9, 2017; Lease expired February 28, 2020

State the term remaining

List the contract number of any government contract

Ryder Truck Rental, Inc.
6000 Windward Parkway
Alpharetta, GA 30005

2.144. State what the contract or lease is for and the nature of the debtor's interest
Truck Lease and Service Agreement dated August 20, 2010; Lease expires April 21, 2021

State the term remaining

List the contract number of any government contract

Ryder Truck Rental, Inc.
6000 Windward Parkway
Alpharetta, GA 30005

2.145. State what the contract or lease is for and the nature of the debtor's interest
Truck Lease and Service Agreement dated November 4, 2014; Lease expires September 16, 2021

State the term remaining

List the contract number of any government contract

Ryder Truck Rental, Inc.
6000 Windward Parkway
Alpharetta, GA 30005

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.146. State what the contract or lease is for and the nature of the debtor's interest
 Truck Lease and Service Agreement dated December 10, 2010; Lease expires May 6, 2019

State the term remaining

List the contract number of any government contract

Ryder Truck Rental, Inc.
 6000 Windward Parkway
 Alpharetta, GA 30005

2.147. State what the contract or lease is for and the nature of the debtor's interest
 Truck Lease and Service Agreement dated April 26, 2011; Lease expires February 3, 2022

State the term remaining

List the contract number of any government contract

Ryder Truck Rental, Inc.
 6000 Windward Parkway
 Alpharetta, GA 30005

2.148. State what the contract or lease is for and the nature of the debtor's interest
 Truck Lease and Service Agreement dated January 10, 2013; Lease expires June 27, 2019

State the term remaining

List the contract number of any government contract

Ryder Truck Rental, Inc.
 6000 Windward Parkway
 Alpharetta, GA 30005

2.149. State what the contract or lease is for and the nature of the debtor's interest
 Truck Lease and Service Agreement dated August 11, 2009; Lease No. 629303 expires March 29, 2020 and Lease No. 629304 expires January 30, 2020

State the term remaining

List the contract number of any government contract

Ryder Truck Rental, Inc.
 6000 Windward Parkway
 Alpharetta, GA 30005

2.150. State what the contract or lease is for and the nature of the debtor's interest
 Truck lease and Service Agreement dated August 11, 2009; Lease No. 629305 expires April 30, 2020 and Lease No. 631278 expires October 16, 2019

State the term remaining

List the contract number of any government contract

Ryder Truck Rental, Inc.
 6000 Windward Parkway
 Alpharetta, GA 30005

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.151. State what the contract or lease is for and the nature of the debtor's interest
 Truck Lease and Service Agreement dated April 26, 2011; Lease expires October 3, 2019

State the term remaining

List the contract number of any government contract

Ryder Truck Rental, Inc.
 6000 Windward Parkway
 Alpharetta, GA 30005

2.152. State what the contract or lease is for and the nature of the debtor's interest
 Truck Lease and Service Agreement; Lease No. 529945 expires June 21, 2019

State the term remaining

List the contract number of any government contract

Ryder Truck Rental, Inc.
 6000 Windward Parkway
 Alpharetta, GA 30005

2.153. State what the contract or lease is for and the nature of the debtor's interest
 Partners Cooperative Laundry Service Agreement dated September 1, 2013 and Participating Hospital Agreement dated March 18, 2016; expires September 30, 2020

State the term remaining

List the contract number of any government contract

Self Regional Healthcare
 1325 Spring Street
 Greenwood, SC 29646

2.154. State what the contract or lease is for and the nature of the debtor's interest
 Partners Cooperative Laundry Service Agreement dated September 1, 2013 and Participating Hospital Agreement dated March 18, 2016 with Self Regional Healthcare; expires September 30, 2020 (Spartanburg location)

State the term remaining

List the contract number of any government contract

Self Regional Medical Center
 402 Maxwell Avenue
 Greenwood, SC 29646-2619

2.155. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract; EastPoint

State the term remaining

SFMC Outpatient Imaging & Specialty Care at Camp Creek
 3890 Redwine Road SW, Ste 104
 Atlanta, GA 30331-5583

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract _____

2.156. State what the contract or lease is for and the nature of the debtor's interest

Service Contract for recycling equipment dated November 4, 2009; contract expired November 2012 with automatic yearly renewals

State the term remaining _____

List the contract number of any government contract _____

Skyline Dynamics, LLC
20423 State Route 7, Suite F-6
Boca Raton, FL 33498

2.157. State what the contract or lease is for and the nature of the debtor's interest

Partners Cooperative Laundry Service Agreement with Archbold Memorial Hospital and Participating Hospital Agreement for Tri-State location;

State the term remaining _____

List the contract number of any government contract _____

South Georgia Surgical Associates
100 Mimosa Drive
Thomasville, GA 31792-6676

2.158. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
EastPoint

State the term remaining _____

List the contract number of any government contract _____

Southeastern Interventional Pain Assoc.
1140 Hammond Drive NE, #D4190
Atlanta, GA 30328-5338

2.159. State what the contract or lease is for and the nature of the debtor's interest

Participating Hospital Agreement/Laundry Service Agreement dated September 1, 2013; contract expires November 1, 2020

State the term remaining _____

List the contract number of any government contract _____

Approximately 1 year, 11 months
Southern Regional Medical Center
11 Upper Riverdale Road, SW
Riverdale, GA 30274

2.160. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
EastPoint

State the term remaining _____

Southern Surgical Arts Calhoun
120 Cornerstone Way SE, Ste C
Calhoun, GA 30701-4791

Debtor 1 Alliance Laundry & Textile Service, LLC

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract _____

2.161. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract _____

Southwest Georgia OB/GYN
808 13th Avenue
Albany, GA 31701-13282.162. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract _____

Southwest Georgia Physical Therapy
333 Randolph Street
Cuthbert, GA 39840-61272.163. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract _____

Southwest Georgia Regional Med. Center
361 Randolph Street
Cuthbert, GA 39840-61272.164. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Spartanburg

State the term remaining

List the contract number of any government contract _____

Spartanburg Community College
Tyger River Campus
290 Commerce Court, Rm 303
Duncan, SC 29334-92852.165. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Spartanburg

State the term remaining

List the contract number of any government contract _____

SPN Star Wipers, Inc. - RAGS
1125 E. Main Street
Newark, OH 43055-8869

First Name Middle Name Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.166. State what the contract or lease is for and the nature of the debtor's interest
 Purchase Agreement dated September 22, 2012

State the term remaining

List the contract number of any government contract _____

Standard Textile
One Knollcrest Drive
Cincinnati, OH 45237

2.167. State what the contract or lease is for and the nature of the debtor's interest
 Custom Product Agreement dated December 19, 2016; agreement expired December 19, 2017, with automatic yearly renewals

State the term remaining

List the contract number of any government contract _____

Standard Textile
One Knollcrest Drive
Cincinnati, OH 45237

2.168. State what the contract or lease is for and the nature of the debtor's interest
 Purchase Agreement dated April 12, 2013

State the term remaining

List the contract number of any government contract _____

Standard Textile
One Knollcrest Drive
Cincinnati, OH 45237

2.169. State what the contract or lease is for and the nature of the debtor's interest
 Bag Purchase and Recycling Agreement dated October 1, 2009 for East Point, Georgia facility;

State the term remaining

List the contract number of any government contract _____

Streamline Solutions, LLC
P.O. Box 560775
Orlando, FL 32856

2.170. State what the contract or lease is for and the nature of the debtor's interest
 Customer Contract; Spartanburg

State the term remaining

List the contract number of any government contract _____

Surgery Center at Pelham
2755 S. Highway 14
Greer, SC 29650-4902

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.171. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
EastPoint

State the term remaining

List the contract number of any government contract

SurgiCare Gwinnett
367 Athens Highway, Ste 100
Loganville, GA 30052-2207

2.172. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
EastPoint

State the term remaining

List the contract number of any government contract

T3 Labs, Inc.
387 Technology Circle NW, Ste 175
Atlanta, GA 30313-2422

2.173. State what the contract or lease is for and the nature of the debtor's interest
Non-Compete and Non-Solicitation Agreement dated March 8, 2018

State the term remaining

List the contract number of any government contract

Tamelia N. Moore
3243 Staton Drive
Albany, GA 31705

2.174. State what the contract or lease is for and the nature of the debtor's interest
Partners Cooperative Laundry Service Agreement with Archbold Memorial Hospital and Participating Hospital Agreement for Tri-State location;

State the term remaining

List the contract number of any government contract

Thomasville Physical Therapy
300 W. Hansell Street
Thomasville, GA 31792-6650

2.175. State what the contract or lease is for and the nature of the debtor's interest
Staffing Services Agreement dated September 22, 2015

State the term remaining

List the contract number of any government contract

Tyler Staffing Services, Inc.
d/b/a CHASE Professionals
750 Hammond Drive, Bldg. 9
Atlanta, GA 30328

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.176. State what the contract or lease is for and the nature of the debtor's interest

Lease for laundry facility located at 355 Old Greenville Road, Spartanburg, South Carolina dated November 1, 2013; term of lease is 10 years

State the term remaining approximately 5 years

List the contract number of any government contract

ULS Acquisition LLC
Attn: John Giardino
805 Third Avenue, 8th Floor
New York, NY 10022

2.177. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Spartanburg

State the term remaining

List the contract number of any government contract

Union County Emergency Medical Services
1262 S. Duncan Bypass
Union, SC 29379-7218

2.178. State what the contract or lease is for and the nature of the debtor's interest

Partners Cooperative Laundry Service
Agreement with Archbold Memorial Hospital and
Participating Hospital
Agreement for Tri-State location;

State the term remaining

List the contract number of any government contract

Urgent Care & Corporate Care Centers
2705 E. Pinetree Blvd, Ste A
Thomasville, GA 31792-4875

2.179. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract

Urgent Care Center at Phoebe East
2410 Sylvester Road
Albany, GA 31705

2.180. State what the contract or lease is for and the nature of the debtor's interest

Contract with United States of America for linen service to the Veterans Administration in Augusta, Georgia dated August 1, 2017 (EastPoint and Spartanburg locations)

State the term remaining

List the contract number of any

VAMC Augusta Downtown Division
800 Bailie Drive
Augusta, GA 30912-2619

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract _____

2.181. State what the contract or lease is for and the nature of the debtor's interest

Contract with United States of America for linen service to the Veterans Administration in Augusta, Georgia dated August 1, 2017 (EastPoint and Spartanburg locations)

State the term remaining _____

List the contract number of any government contract _____

VAMC Augusta Uptown Division
1 Freedom Way
Augusta, GA 30904-6258

2.182. State what the contract or lease is for and the nature of the debtor's interest

Contract with United States of America for linen service to the Veterans Administration in Augusta, Georgia dated August 1, 2017 (Spartanburg location)

State the term remaining _____

List the contract number of any government contract _____

VAMC Charleston
109 Bee Street
Charleston, SC 29401-5703

2.183. State what the contract or lease is for and the nature of the debtor's interest

Contract with United States of America for linen service to the Veterans Administration in Augusta, Georgia dated August 1, 2017 (Spartanburg location)

State the term remaining _____

List the contract number of any government contract _____

VAMC Columbia
6439 Garners Ferry Road
Columbia, SC 29209-1638

2.184. State what the contract or lease is for and the nature of the debtor's interest

Contract with United States of America for linen service to the Veterans Administration in Augusta, Georgia dated August 1, 2017

State the term remaining _____

List the contract number of any government contract _____

VAMC Dublin
1826 Veterans Blvd.
Dublin, GA 31021-3620

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.185. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
EastPoint

State the term remaining

VITAS Innovate Hospice Care
Direct Sale
123 SE 3rd Avenue, Ste 440
Miami, FL 33131-2003

List the contract number of any government contract

2.186. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
EastPoint

State the term remaining

VITAS Innovative Hospice Care
931 Quarry Road
Stockbridge, GA 30281-4352

List the contract number of any government contract

2.187. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
EastPoint

State the term remaining

VITAS Innovative Hospice Care - Duluth
3840 Peachtree Industrial Blvd., Ste 101
Duluth, GA 30096-5031

List the contract number of any government contract

2.188. State what the contract or lease is for and the nature of the debtor's interest
Contract with United States of America for liner services at Moncrief Army Health Clinic, Fort Jackson, South Carolina dated May 1, 2018

State the term remaining

W40M RHCO-Atlantic USAHCA
Northern Regional Health Contracting Off
6021 5th Street, Bldg. 1467
Fort Belvoir, VA 22060-5580

List the contract number of any government contract

W91YTZ-17-P-0286

2.189. State what the contract or lease is for and the nature of the debtor's interest
Contract with the United States of America for liner service at Moncrief Army Health Clinic, Fort Jackson, South Carolina dated November 1, 2018

State the term remaining

W40M RHCO-Atlantic USAHCA
Northern Reg. Contracting Office NRCO
6021 5th Street, Bldg. 1467
Fort Belvoir, VA 22060-5580

List the contract number of any government contract

W91YTZ-19-P-0014

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.190.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Agreement for Natural Gas Sales dated November 16, 2017; term of agreement is 2/1/18 through 1/31/19)</p> <p>Approximately 2 months</p> <p>Walton Energy, Inc. d/b/a Walton EMC Natural Gas P.O. Box 260 Monroe, GA 30655</p>
2.191.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Linen Service Agreement with WellStar Health System, Inc. dated April 1, 2016; contract expires March 31, 2019 (EastPoint location)</p> <p>WellStar AMC Morrow Healthcare 1000 Corporate Center Drive, Ste 200 Morrow, GA 30260-4129</p>
2.192.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Linen Service Agreement with WellStar Health System, Inc. dated April 1, 2016; contract expires March 31, 2019 (EastPoint location)</p> <p>WellStar AMC Bone & Joint Specialists 285 Boulevard NE, Ste 310 Atlanta, GA 30312-4209</p>
2.193.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Linen Service Agreement with WellStar Health System, Inc. dated April 1, 2016; contract expires March 31, 2019 (EastPoint location)</p> <p>WellStar AMC East Point Clinic 1136 Cleveland Avenue, Ste 317 Atlanta, GA 30344-3618</p>
2.194.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Linen Service Agreement with WellStar Health System, Inc. dated April 1, 2016; contract expires March 31, 2019 (EastPoint location)</p> <p>WellStar AMC Gym 303 Parkway Drive NE, #427 Atlanta, GA 30312-1212</p>

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.195. State what the contract or lease is for and the nature of the debtor's interest	Linen Service Agreement with WellStar Health System, Inc. dated April 1, 2016; contract expires March 31, 2019 (EastPoint location)
State the term remaining	
List the contract number of any government contract	WellStar AMC Inman Park Physicians 240 N. Highland Avenue, Ste E Atlanta, GA 30307-5625
2.196. State what the contract or lease is for and the nature of the debtor's interest	Linen Service Agreement with WellStar Health System, Inc. dated April 1, 2016; contract expires March 31, 2019 (EastPoint location)
State the term remaining	
List the contract number of any government contract	WellStar AMC Orthopaedic Rehabilitation 320 Parkway Drive NE Atlanta, GA 30312-1213
2.197. State what the contract or lease is for and the nature of the debtor's interest	Linen Service Agreement with WellStar Health System, Inc. dated April 1, 2016; contract expires March 31, 2019 (EastPoint location)
State the term remaining	
List the contract number of any government contract	WellStar AMC Primary Care Clinic 3886 Princeton Lakes Way SW, Ste 120A Atlanta, GA 30331-5511
2.198. State what the contract or lease is for and the nature of the debtor's interest	Linen Service Agreement with WellStar Health System, Inc. dated April 1, 2016; contract expires March 31, 2019 (EastPoint location)
State the term remaining	
List the contract number of any government contract	WellStar AMC Primary Care Clinic 560 Amsterdam Avenue NE, Ste D Atlanta, GA 30306-3479
2.199. State what the contract or lease is for and the nature of the debtor's interest	Linen Service Agreement with WellStar Health System, Inc. dated April 1, 2016; contract expires March 31, 2019 (EastPoint location)
State the term remaining	
	WellStar AMC Primary Care Clinic 3355 Cascade Road SW Atlanta, GA 30311-3678

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract

2.200. State what the contract or lease is for and the nature of the debtor's interest

Linen Service Agreement with WellStar Health System, Inc. dated April 1, 2016; contract expires March 31, 2019 (EastPoint location)

State the term remaining

List the contract number of any government contract

WellStar Atlanta Medical Center
303 Parkway Drive NE, #427
Atlanta, GA 30312-1212

2.201. State what the contract or lease is for and the nature of the debtor's interest

Linen Service Agreement dated April 1, 2016; contract expires March 31, 2019

State the term remaining

List the contract number of any government contract

Wellstar Health System, Inc.
793 Sawyer Road
Marietta, GA 30062

2.202. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Spartanburg

State the term remaining

List the contract number of any government contract

Wesley Commons
1110 Marshall Road
Greenwood, SC 29646-4216

2.203. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Spartanburg

State the term remaining

List the contract number of any government contract

Westside Dermatology
1250 John B White Sr. Blvd.
Spartanburg, SC 29306-3929

2.204. State what the contract or lease is for and the nature of the debtor's interest

Customer Contract;
Spartanburg

State the term remaining

List the contract number of any government contract

Whitten Center
P.O. Box 4540
Columbia, SC 29240-4540

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.205. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract

Willson Hospice House
320 Foundation Lane
Albany, GA 31707-5862

2.206. State what the contract or lease is for and the nature of the debtor's interest
Cooperative Agreement with Wiregrass Rehabilitation Center, Inc. dated April 5, 2017 (Tri-State location)

State the term remaining

List the contract number of any government contract

Wiregrass Rehabilitation Center II
2080 Child Street
Jacksonville, FL 32214-5005

2.207. State what the contract or lease is for and the nature of the debtor's interest
Cooperative Agreement dated April 5, 2017

State the term remaining

List the contract number of any government contract

Wiregrass Rehabilitation Center, Inc.
795 Ross Clark Circle
Dothan, AL 36303

2.208. State what the contract or lease is for and the nature of the debtor's interest
Partners Cooperative Laundry Service
Agreement with Archbold Memorial Hospital and
Participating Hospital
Agreement for Tri-State location;

State the term remaining

List the contract number of any government contract

Wound Management & Hyperbaric Medicine
113 W. Hansell Street
Thomasville, GA 31792-6664

2.209. State what the contract or lease is for and the nature of the debtor's interest
Customer Contract;
Tri-State

State the term remaining

List the contract number of any government contract

Zero Waste Solutions
3276 Mitchell Blvd.
Moody A F B, GA 31699-1500

Fill in this information to identify the case:

Debtor name Alliance Laundry & Textile Service, LLC

United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) 18-31755-5

Check if this is an amended filing

Official Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: **Codebtor**

Column 2: **Creditor**

Name	Mailing Address	Name	Check all schedules that apply:
------	-----------------	------	---------------------------------

2.1	Alliance Laundry and Textile	Service of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	Med One Capital Funding, LLC	<input checked="" type="checkbox"/> D <u>2.12</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.2	Alliance Laundry and Textile	Service of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	Optumhealth Bank, Inc.	<input checked="" type="checkbox"/> D <u>2.18</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
-----	------------------------------	--	------------------------	---

2.3	Alliance Laundry and Textile	Service of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	IPA One	<input checked="" type="checkbox"/> D <u>2.6</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.4	Alliance Laundry and Textile	Service of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	Prime Alliance Bank	<input checked="" type="checkbox"/> D <u>2.19</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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Debtor Alliance Laundry & Textile Service, LLC

Case number (if known) 18-31755-5

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.5	Alliance Laundry and Textile	Service of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	Prime Alliance Bank	<input checked="" type="checkbox"/> D <u>2.20</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.6	Alliance Laundry and Textile	Service of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	IPA One	<input checked="" type="checkbox"/> D <u>2.7</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.7	Alliance Laundry and Textile	Service of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	Med One Capital Funding, LLC	<input checked="" type="checkbox"/> D <u>2.13</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.8	Alliance Laundry and Textile	Service of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	Optum Bank, Inc.	<input checked="" type="checkbox"/> D <u>2.17</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.9	Alliance Laundry and Textile Service	of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.10	Alliance Laundry and Textile Service	of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.11	Alliance Laundry and Textile Service	of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor Alliance Laundry & Textile Service, LLC

Case number (if known) 18-31755-5

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.12	Alliance Laundry and Textile Service	of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.13	Alliance Laundry and Textile Service	of Atlanta, LLC 60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.14	Alliance LTS Winchester, LLC	60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.15	Alliance LTS Winchester, LLC	60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.16	Alliance LTS Winchester, LLC	60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.17	Alliance LTS Winchester, LLC	60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.18	Alliance LTS Winchester, LLC	60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.19	Atlas Health Care Linen Services Co.,LLC	414 West Taylor Street Syracuse, NY 13202	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor Alliance Laundry & Textile Service, LLC

Case number (if known) 18-31755-5

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.20	Atlas Health Care Linen Services Co.,LLC	414 West Taylor Street Syracuse, NY 13202	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.21	Atlas Health Care Linen Services Co.,LLC	414 West Taylor Street Syracuse, NY 13202	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.22	Atlas Health Care Linen Services Co.,LLC	414 West Taylor Street Syracuse, NY 13202	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.23	Atlas Health Care Linen Services Co.,LLC	414 West Taylor Street Syracuse, NY 13202	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.24	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	Med One Capital Funding, LLC	<input checked="" type="checkbox"/> D <u>2.12</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.25	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	Optumhealth Bank, Inc.	<input checked="" type="checkbox"/> D <u>2.18</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.26	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	IPA One	<input checked="" type="checkbox"/> D <u>2.6</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.27	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	Prime Alliance Bank	<input checked="" type="checkbox"/> D <u>2.19</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor Alliance Laundry & Textile Service, LLC

Case number (if known) 18-31755-5

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.28	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	Prime Alliance Bank	<input checked="" type="checkbox"/> D <u>2.20</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.29	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	IPA One	<input checked="" type="checkbox"/> D <u>2.7</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.30	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	Med One Capital Funding, LLC	<input checked="" type="checkbox"/> D <u>2.13</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.31	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	Optum Bank, Inc.	<input checked="" type="checkbox"/> D <u>2.17</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.32	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	IPA One	<input checked="" type="checkbox"/> D <u>2.8</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.33	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	Med One Capital Funding, LLC	<input checked="" type="checkbox"/> D <u>2.14</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.34	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	MB Financial Bank, N.A.	<input checked="" type="checkbox"/> D <u>2.11</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.35	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	IPA One	<input checked="" type="checkbox"/> D <u>2.9</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor Alliance Laundry & Textile Service, LLC

Case number (if known) 18-31755-5

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.36	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	Med One Capital Funding, LLC	<input checked="" type="checkbox"/> D <u>2.15</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.37	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.38	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.39	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.40	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.41	Centerstone Linen Services, LLC	60 Grider Street Buffalo, NY 14215	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.42	John Giardino	203 E. 77th Street New York, NY 10075	1631 Willingham BT, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.43	John Giardino	188 Bidwell Parkway Buffalo, NY 14222	HSBC Bank USA, National Association	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor Alliance Laundry & Textile Service, LLC

Case number *(if known)* 18-31755-5

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.44 John Giardino 188 Bidwell Parkway
Buffalo, NY 14222 HSBC Bank USA,
National Association D 2.1
 E/F _____
 G _____

2.45 John Giardino 188 Bidwell Parkway
Buffalo, NY 14222 HSBC Bank USA,
National Association D 2.3
 E/F _____
 G _____

2.46 John Giardino 188 Bidwell Parkway
Buffalo, NY 14222 HSBC Bank USA,
National Association D 2.4
 E/F _____
 G _____

2.47 John Giardino 188 Bidwell Parkway
Buffalo, NY 14222 HSBC Bank USA,
National Association D 2.5
 E/F _____
 G _____

United States Bankruptcy Court
Northern District of New York

In re Alliance Laundry & Textile Service, LLC

Debtor(s)

Case No. 18-31755-5Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	0.00
Prior to the filing of this statement I have received	\$	0.00
Balance Due	\$	0.00

2. The source of the compensation paid to me was:

Debtor Other (specify): See Disclosure of Compensation for Centerstone Linen Services, LLC (Chapter 11 Case No. 18-31754)

3. The source of compensation to be paid to me is:

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]
 Negotiate with all creditors, including secured creditors, unsecured creditors, taxing authorities and other government agencies concerning claim treatment, negotiate with prospective purchasers, administer sale of assets under section 363 of the Bankruptcy Code, negotiate use of cash collateral, prepare chapter 11 plans and disclosure statements and all matters to property administer chapter 11 cases.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

January 11, 2019
Date

/s/ Stephen A. Donato
 Stephen A. Donato
Signature of Attorney
 Bond, Schoeneck & King, PLLC
 One Lincoln Center
 Syracuse, NY 13202
 (315) 218-8000 Fax: (315) 218-8100
sdonato@bsk.com
Name of law firm

**United States Bankruptcy Court
Northern District of New York**

In re Alliance Laundry & Textile Service, LLC

Debtor(s)

Case No. 18-31755-5
Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Centerstone Linen Services, LLC 60 Grider Street Buffalo, NY 14215			100% interest

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the Chief Executive Officer of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date January 11, 2019

Signature /s/ John Giardino
John Giardino

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
Northern District of New York**

In re Alliance Laundry & Textile Service, LLC
Debtor(s)

Case No. 18-31755-5
Chapter 11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Alliance Laundry & Textile Service, LLC in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

Centerstone Linen Services, LLC
60 Grider Street
Buffalo, NY 14215

None [*Check if applicable*]

January 11, 2019
Date

/s/ Stephen A. Donato
Stephen A. Donato
Signature of Attorney or Litigant
Counsel for Alliance Laundry & Textile Service, LLC
Bond, Schoeneck & King, PLLC
One Lincoln Center
Syracuse, NY 13202
(315) 218-8000 Fax:(315) 218-8100
sdonato@bsk.com